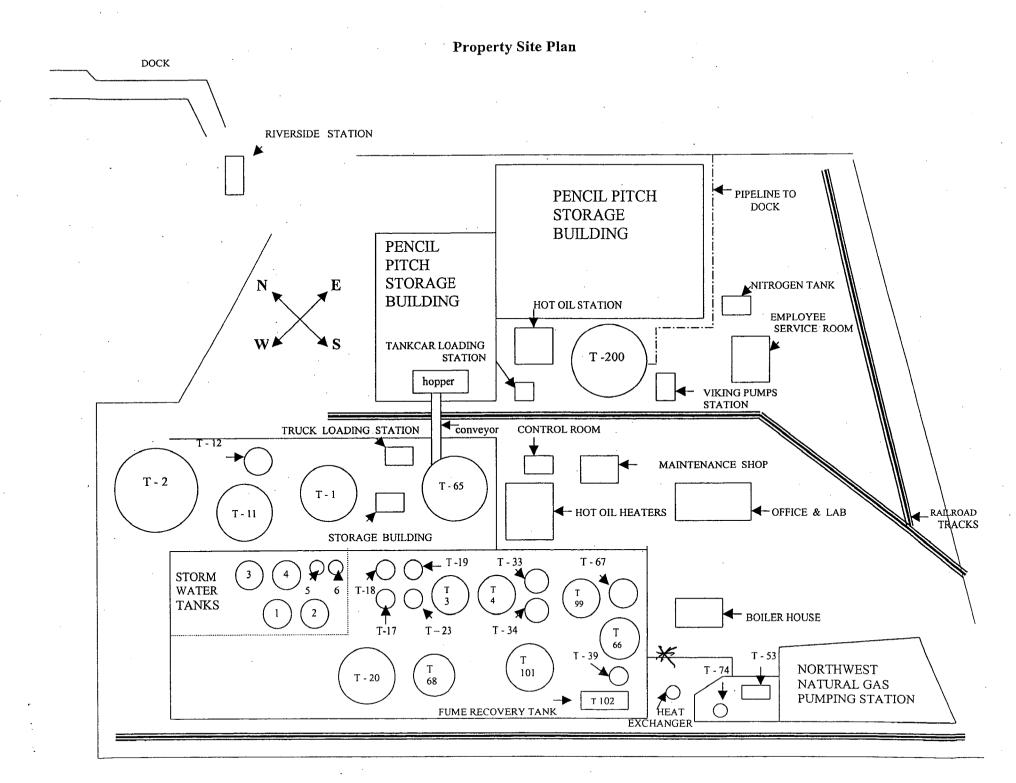
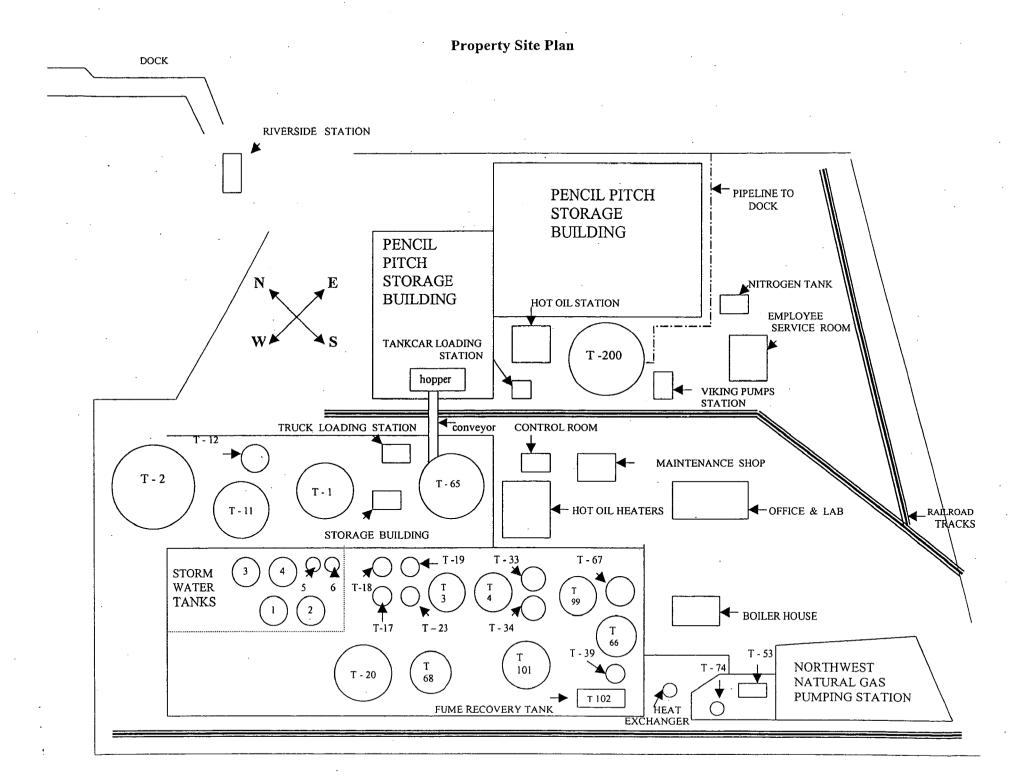
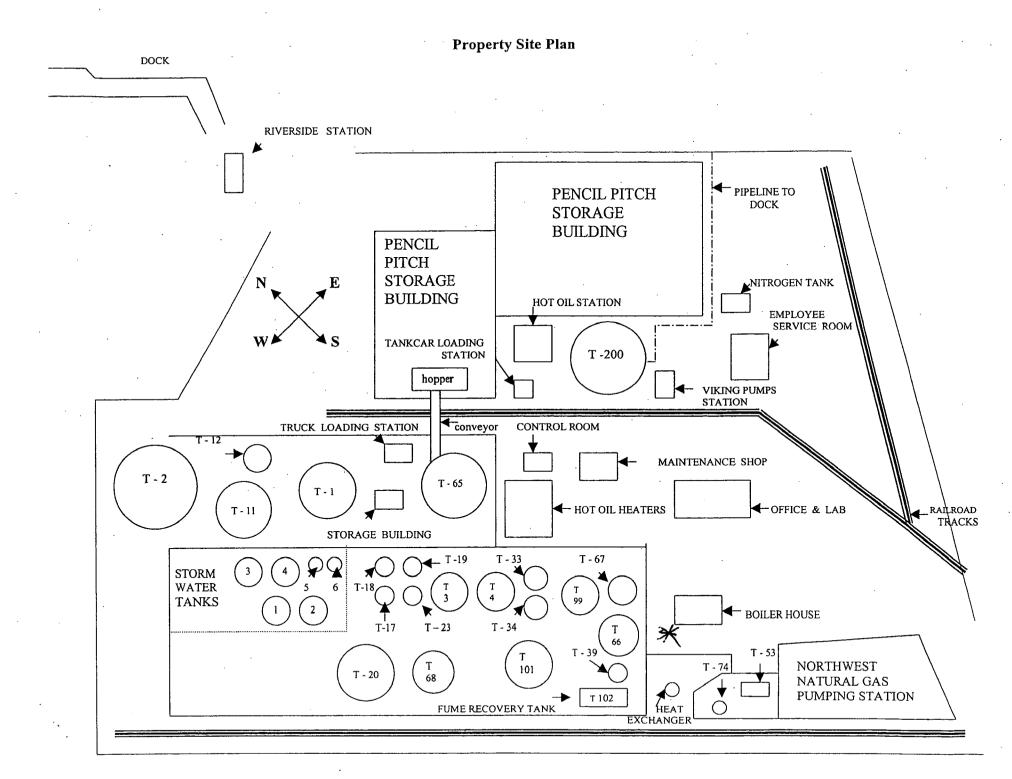
COMPANY NAME		CHSE	NATION :	DATE	d C	START		END TIME
Koppers Inc.		SEC	3-2	0-1		•	453	0631
STREET ADDRESS 7540 N.W. St. Helens F	Rd.	100	0	15	30	45		COMMENTS
		1	100	[Ö	10	10		·
CITY	STATE   ZIP	2	16	15	15	10		
PHONE (KEY CONTACT)	SOURCE ID NUMBER	3	10	10	15	10		
503-286-3681	26-2930	.4	10	15	15	15		
PROCESS EQUIPMENT	OPERATING MODE Operating hours	• 5	10	10	15	10		
Fume Recovery System CONTROL SQUIPMENT	OPERATING MODE	6	15	15	10	10		
(0)	·	7	10					
DESCRIBE EMISSION POINT		8						
22inch diameter stack		9						
on top of recovery tank.		10.						
	HEIGHT RELATIVE TO DESERVER Start 11ft. End Same	1,1			<u>.</u>			
DISTANCE FROM OBSERVER	DIRECTION FROM DESERVER	12				·		
	Son West End Same	13						
DESCRIBE EMISSIONS SERVE F1 100	same	14						
EMISSION COLOR	IF WATER DROPLET PILIME	15						
POINT IN THE PLUME AT WHICH OPAGE	ADMINIST Detached C	16						**************************************
smTonot & Tack		17						
DESCRIBE PLUME BACKGROUND		18						
	SKY SHOTIONS A	19						<del></del>
sombreed game	Sum Change En Sa Me	20					-	
	SIEN SOUTH END SOME	21				<del> </del>		
AMBIENT TEMP	WET BULB TEMP RH. DETERM	22				<del> </del> -		
Stat. 4/1 End 42°5	38°F 88%	23						
Stack SOURCE LAYO	DUT SKETCH Draw North Arrow	24						
Sun -8-	<b>→</b>	25			-			
Wind		26	· -			<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·
$\overline{x}$	Emergeen Point	27	<del>                                     </del>		<del> </del>			
. 1		28	<del> </del>					
		29						
		30	<del>                                     </del>	<del> </del>		-		
			RVERS	MANAGE OF		1		
	Observer's Position					<b>A</b> 1517		<i>)</i>
		OBSE	RVER'S	SIGNAT				7-20-08
140		1 -	NEATO					. / - 10
Sun Locati	on Line		PPED BY			<del></del>		DATE
ADDITIONAL INFORMATION	ck loading	Yak	ima C	lean	Air A	uthor	ity	3-1408
		CONT	MUED C	N VEO	FORM N	JMBER		
	<del></del>							



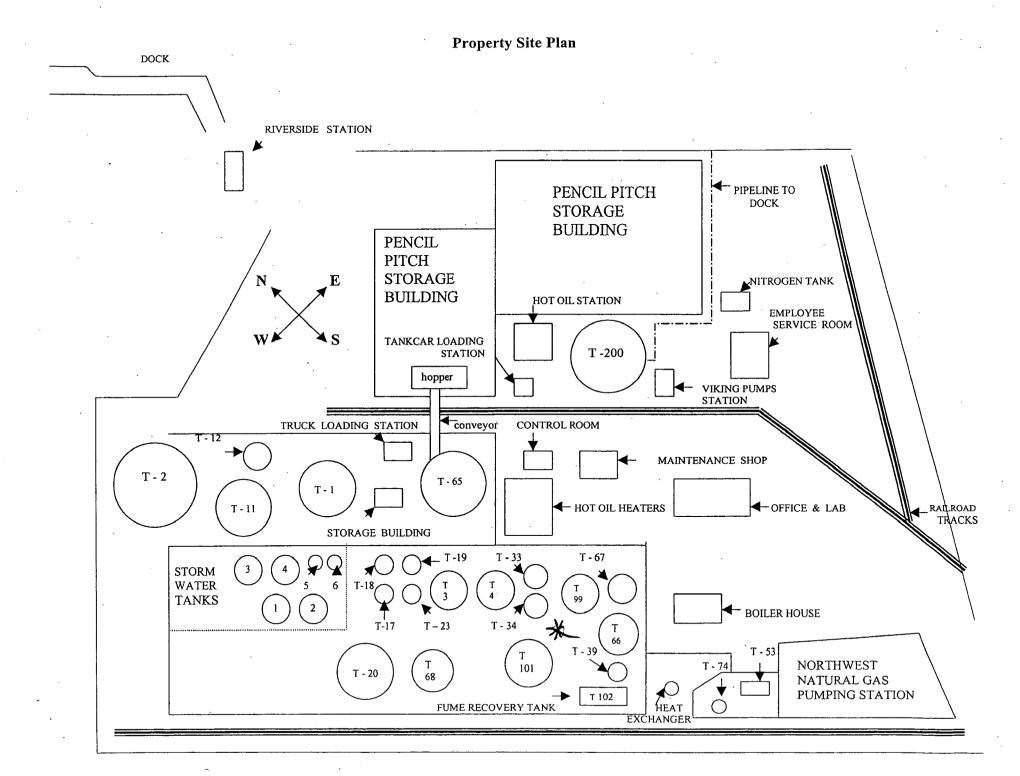
			EVATION			START	The state of the s	i ENO TIME
Koppers Inc.		4		2/	08		1030	0717
STREET ADDRESS 7540 N.W. St. Helens	Rđ.	392	0	15	30	45		COMMENTS
		1	15	15	15	15		
CITY	STATE ZIP	2	15	10	10	10		
Portland	OR 97210	3	10	1/	10	10		
PHONE (KEY CONTACT) 503-286-3681	26-2930	.4	10	10	10	10		
PROCESS EQUIPMENT	OPERATING MODE	5	10	15	15	M	)	
Fume Recovery System CONTROL SQUIPMENT	Operating hours	6	10	15	15	15		
CONTROL EQUIPMENT	Or EPATING MODE	7	15	10	10	10		
DESCRIBE EMISSION POINT		8						
22inch diameter stack		9						
on top of recovery tank		10.						
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO OBSERVER	11						3
25 It. DISTANCE FROM DESERVER	DIRECTION FROM OBSERVER	12			-			· · · · · · · · · · · · · · · · · · ·
Start End	Start End	13			-			
DESCRIBE EMISSIONS		14		-				
STER CAMPING  EMISSION COLOR	F WATER DROPLET, PILIME	15						
1 1/2	1	16						
POINT IN THE PLUME AT WHICH OPAGE SIEN / Flabour and	RIGHT STACK							
	Enc .	17						····
DESCRIBE PLUME BACKGROUND SIM TORRES HIS IS	Sen Sance	18		ļ				
BACKGROUND CZLOR	SKY CONDITIONS/	19		<u> </u>				
SIM CREEN EN Same	LAMPO DIGETTON	20		<u></u>				
Son 7.10 MPENOSame	SET SOUTH ET SAME	21						
SOUR 7-10 MPERO SAME  AMBIENT TEMP  SOUR JEF END SAME	WET BULS TEMP RH, DerCERT	22						
<del>,</del>		23			İ			
STACK SOURCE LAY	OUT SKETCH Draw North Arrow	24				_		
Sun +		25				1:		
Wind		26						
	Emission Point	27	<del> </del>	-				
		28	<del> </del>					
		29	-		<del>                                     </del>	<del> </del> -		
			<u> </u>	<b> </b>		<u> </u>		
		30		1		]		
	Observer's Position		AVERS I			-1517		
	- OSILION		BYPES.				<del></del>	DATE
1	was -	CEC	AZATIÓ		<u> </u>	3-1-		4-21-08
Sun Loca	tion Line		ppers					
ADDITIONAL INFORMATION		Yakima Clean Air Authority 3.1708						
Jankean le	ar ing		MUED O					<del>Í</del> I I Í
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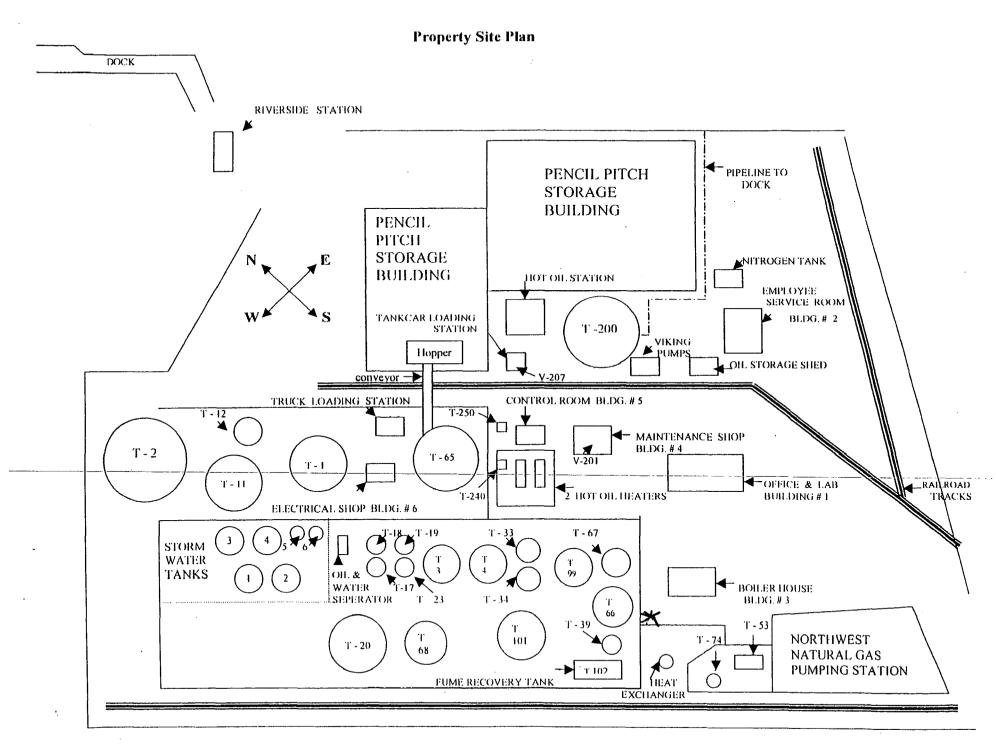
COMPANY NAME			CHISE	EVATION	TIME 303,1	END TIME			
Koppers Inc.  STREET ADDRESS 7540 N.W. St. Helens			38E	0	15	30	45	12.3.61	COMMENTS
7540 N.W. St. Helens	KQ.		100						CMMEN IS
	•		1	5	3	5	5		
CITY		ZIP	2	5	5	5	5		
PHONE (KEY CONTACT)	OR SOURCE ID NUMBE	97210	3	5	10	10	3		
503-286-3681	26-2930		.4	5	10	5	3		
PROCESS EQUIPMENT		RATING MODE	. 5	3	w	10	10		
Fume Recovery System		rating hours	6	10	5	10	10		
CONTROL EQUIPMENT	OPER	RATING MODE	7	10	5	17			
DESCRIBE EMISSION POINT			8	10	_	10			
221nch diameter stack			-		<del> </del>				
			-		<del> </del>				
on top of recovery tank	: HEIGHT RELATIVE	TO OBSERVER	10.	<del></del>	ļ			-,	
25 ft.	san llft.	End Same	117			···	•	· .	
_	DIRECTION FROM	- 1	12						· · · · · · · · · · · · · · · · · · ·
Start End	Steri	End	13				·		
DESCRIBE EMISSIONS SEIN LAFT, NO	En Sama	-/	14						
EMISSION COLOR	IF WATER DROPLE		15						
POINT IN THE PLUME AT WHICH OPAGE	Attached I	Detached C	16						
	to land		17						
DESCRIBE PLUME BACKGROUND	7		18		-				
solkers Hillside	to Same		19						
BACKGROUND COLOR SEMECAN ENGLANCE	SKY CONDITIONS	En Samo			<del> </del>	ļ	<del> </del>		
WIND SPEED	WING DIRECTION	30/4/00	20				<del>}</del>	-	
SING O/M END GARE	SEE BULS TEMP	End	21						
Star 80 9 End Sent	499	RH. percent	7 22					<u> </u>	
States SOURCE LAY	OUT SKETCH	Oraw North Arrow	23						
with Plume			24						<u> </u>
Sum ·			25		-		:		
Wind -			25	·					
	Emission Point		27						
7		3	28						<del></del>
<b>♣</b> \$-		·	29	-		<del> </del>	<del> </del>		
			30		-	-	<del> </del>		
·			<u></u>			<u> </u>			
·	Observer's Positio			AVERS J. Tu			-1517	- !	
	- 3 POSITIO	т 		RVERS					DATE
14	w /		CRC	NZATIO					1-18-08
Sul Local		>	1	ppers					
ADDITIONAL INFORMATION	, //		CEAT	FIED BY			uthor	i tar	3-30 08
Truckle	radive		Yak	una C.	lean .	HTT A	GUIOL	ı uy	170000
,			CONT	MUED C	N VEO	OPM N	JARER		
			<u> </u>						<del></del>



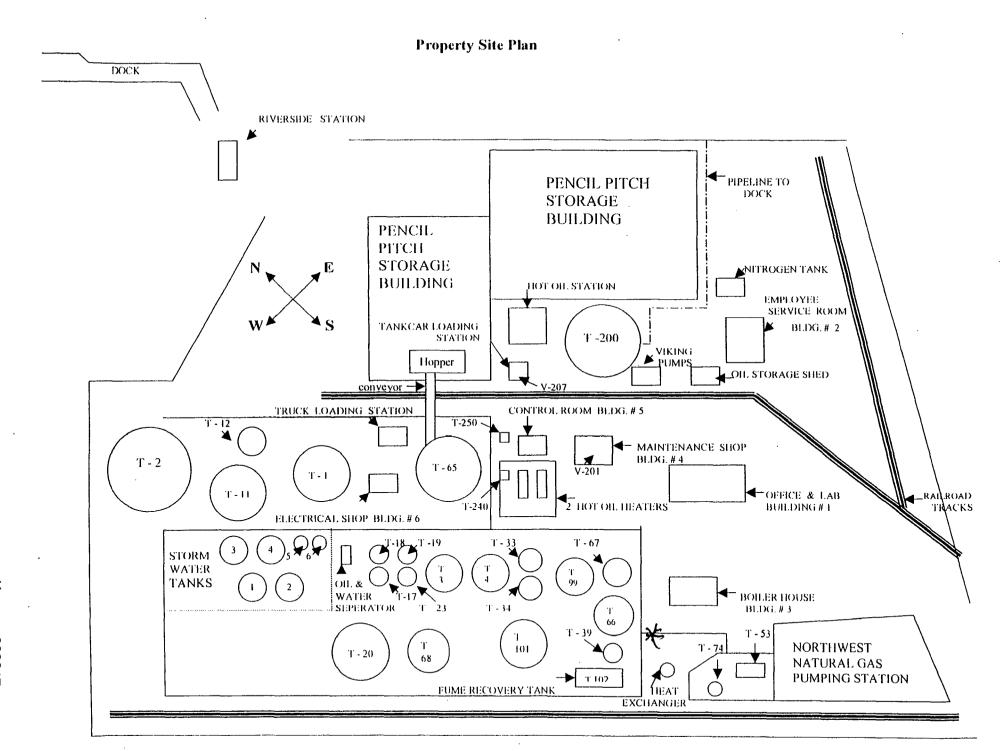
COMPANY NAME			OBSE	AVATION	DATE	00	START	TIME	END TIME
Konners Inc.				7-2	3-	08	06	251,1	0631
STREET ADDRESS 7540 N.W. St. Helens	Rd.		382	0	15	30	45		COMMENTS
			1	3	5	\$	3		
CITY	STATE	Z2P	2	10	5	5	5		
Portland	OR	97210	3	-	100	10	10		· · · · · · · · · · · · · · · · · · ·
PHONE (KEY CONTACT)	SOURCE ID NUMBE	P		-	17/	10			<del></del>
503-286-3681	26-2930		.4	1.5	9	10	5		
PROCESS EQUIPMENT		RATING MODE	. 5	10	10	15	5	ļ	
Fume Recovery System		rating hours	6	7	113	<i></i>	10		
CONTROL SQUIPMENT	OPS	RATING MODE	7	3	10		100		
DESCRIBE EMISSION POINT			8						
22inch diameter stack	•		9		<del>                                     </del>			<u> </u>	<del></del>
					<b>!</b>				
on top of recovery tank			10.	<u> </u>					
HEIGHT ABOVE GROUND LEVEL 25 ft.	san 11ft.	<sub>End</sub> same	11				•		
DISTANCE FROM OBSERVER	DIRECTION FROM		12	<u> </u>		1	,		•
son 90+T End Same	Son youth	= Jame	13	J	<u> </u>		·	[	
DESCRIBE EMISSIONS	Englance		14						
	IF WATER DROPLE	T PLUME	15						
SIER MAY SEND SAME POINT IN THE PLUME AT WHICH OPAGE	TY WAS DETERMINE	Detached 5	16						
sunTop of Stack 1+	In SAM	u	17						
DESCRIBE PLUME BACKGROUND	0	<i>a</i> /	18						
STERT /REE 5/ HINSING	SKY CONDITIONS		19						**************************************
STATE CAN END SANGE	SHOWEREN		20						
Star 3 mph = rosame	San Wies	En Samo	21						
AMBIENT TEMP	WET BULS TEMP	RH. percent	22						
State 58 F End 38 F	46°F	60/1	23				<del> </del>		
writh C	OUT SKETCH.	Oraw North Arrow	24						
Ptume Sun -®-		<b>V</b>	25				:		
Wind			25	·				,	
_ ~	Smession Point		27						
			28						
		·	29		_				
			30						
				RVERS					
	Observer's Positio	n					-151 <i>7</i>	, 2	
			OBSE	ENER'S		The same	·		7-23-08
Sun Loca	uon Line			ppers					
ADDITIONAL INFORMATION			CERT	FIED BY		·	<del></del>		DATE
Lightehle	ack lo	a ding	Yak	ima Cl	ean i	Air A	uthor	ity	3-11-08
			CONT	NUED C	N VEO I	ORM NL	MBER		
		·							<del></del>



COMPANY NAME								NO.	
Koppers Inc.				MATIO	P-	7	START	DOTO 1	
7540 N.W. St. Helens R	d.		Z	0	18	30	45	7/4.3	COMMENTS
			1	3-	5	5	5		
<b>91.</b> 1	TATE	ZP	2	10	5.	3	5		
PCIT ( ALK)	OR DURCE	97210 NUMBER	3	5	10	10	10		
503-286-3681	26-29	30	.4	10)	10	10	10		
PROCESS EQUIPMENT		OPERATING MODE	. 2	10	10	15	15	,	
Fume Recovery System	1	Operating hours	•	(h)	10	10	10	7	
			7	10	10				
DESCRIBE EMISSION POINT		·							
22inch diameter stack			9					,	
on top of recovery tank.			10.						
HEIGHT ABOVE GROUND LEVEL HE 25 ft. SI DISTANCE FROM OBSERVER DI	<b>u</b> r. 11f	t. <sub>End</sub> same	11	·				- · · ·	
DISTANCE FROM DESERVER DI	IRESTION	FROM OBSERVER	12			•	·		,
DESCRIBE EMISSIONS	an pu	sw same	13						
smol of Tings in		me!	14						
- With Same		DROPLET PLUME Detached C	15						
COUNT IN THE PLUME AT WHICH OPACTY STEM JOP 10 RUPH OF SEN	WAS DET	FAMINED	16						
		Same	17						
DESCRIBE PLUME BACKGROUND? BIBM # 1/5/16/4/ //5/5/Enc	6	ne	18						
MCKGROUND COLOR SI	ورد ۲	TIONS	19						
SERIES ENGRAPES			20					· .	<del></del>
SEED SAME SAME SEED WE	ET BULB	TEMP RH. percent	21						
in 357 En Sanc		9 88	22						
SOURCE LAYOUT	SKE	Chew North Arrow	2						
turne			24				-	<u> </u>	
un 🗢		_	25		-	· ·			
			25			-			
$\dot{\varphi}$	SMESSION	Point	27						
			28						
1			29			-			<del></del>
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	) paervije 1	Position	T.	ivers a J. Tur	ner S	iert.	21517		
	<b>&gt;</b>	- SALIEN		WERE					DATE 19-0
1400			OFIGA	NO.					: / / / /
Sun Location	-		Ko	ppers	Inc.				DATE
DOITIONAL INFORMATION			Yaki	ma Cl	ean A	ir A	uthori	ity	3-30-0
			62947	NUED O	N VEO E	COPINA MAI			
					. 100				

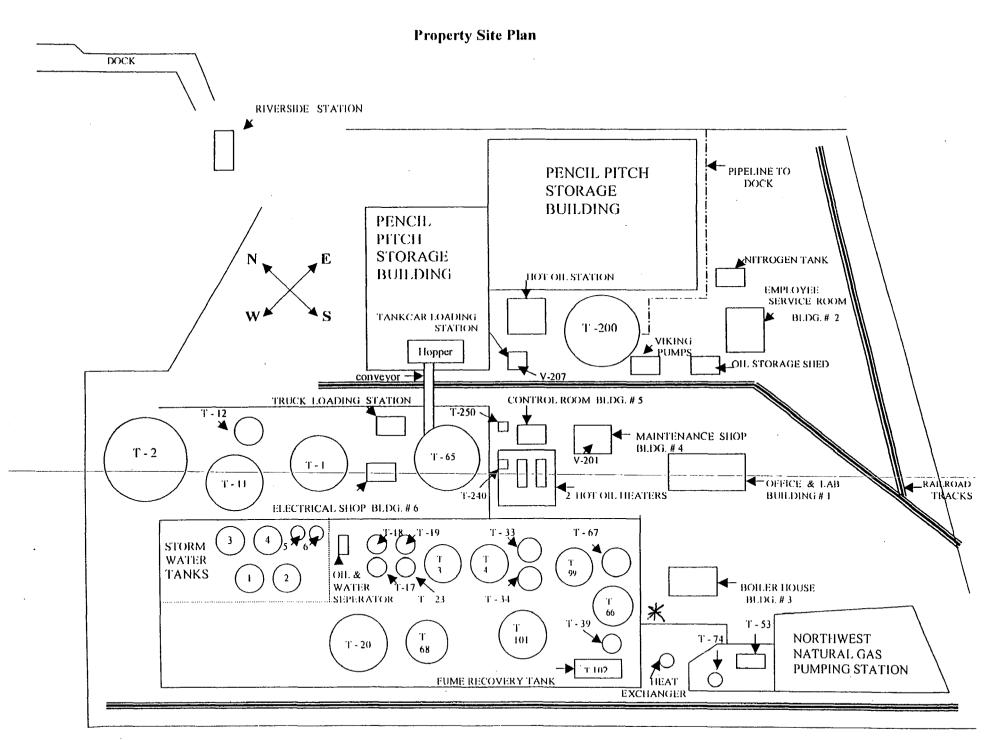


COMPANY NAME			OBSE	AVATION	DATE		START		END TIME
Koppers Inc.			12	-21	10	7	07	262i	0727
STREET ADDRESS 7540 N.W. St. Helens	Rđ.		392	0	15	30	45		COMMENTS
		*	1	10	10	IP	10		
CITY	ł	ZIP	2	15	15	10	5		
Portland		97210	3	7	1	:5	5		
PHONE (KEY CONTACT) 503-286-3681	SOURCE D NUMBE 26-2930	2R	.4	3	10	10	10		
PROCESS EQUIPMENT		NATING MODE	· 5	10	10	10	10		
Fume Recovery System	<u> </u>	rating hours	6	10	10	10			
CONTROL EQUIPMENT	OPER	ATING MODE	7						
DESCRIBE EMISSION POINT			8						
22inch diameter stack	·		9						
on top of recovery tank			10.		<u> </u>				
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE		<del> </del>			·			
	Sen llft.		1,1			-	-	-	
DISTANCE FROM OBSERVER SER LOFFERD SAME	STER IN G	End So MID	12		ļ				
DESCRIBE EMISSIONS		5471.4	13				·		
San / f / del	END SAME	2	14		,				
SIER White End Same	F WATER DROPLE	i i	15						
POINT IN THE PLUME AT WHICH OPAC	TY WAS DETERMINE	D · Detached C	16						
POINT IN THE PLIME AT WHICH OPAC SIET 1000 15 100 17	En Small		17						
DESCRIBE PLUME BACKGROUND	1		18						
SIER HI /5 10 PRES	SICY CONDITIONS		19						
SOBRE GRASCAME	SantaRIII	Cloudy SER	20						
SIEM 3 MOLENO SAMP	WIND DIRECTION	End Same	21					·	
AMBIENT TEMP	WET BULS TEMP	RH. percent	22						
Statt 37 4 End 38 F	34	10/0	23						
writh C	YOUT SKETCH	Draw North Arrow	24						
Ptume Sun ————————————————————————————————————	•		25						
Wind			26						
	Emission Point		27			-		<u> </u>	
نسكر			28						
			29			<u> </u>			
			-			<u> </u>			
			30			<u> </u>	<u> </u>		
	Observer's Position			RVER'S!			-1 <del>517</del>		
	The series of the series	n		RVERTS					DATE
	w /			/ \$	1				2-21-07
Sun Loca	prome		1 -	NEXTIÓN ppers					
ADDITIONAL INFORMATION	2 1 1	19	CERT	FIED BY		(i = 2-	ntha-	itsz	DATE
Ligail filch I	ruck 10	rad Mr	Yaki	ma Cl	ean A	AIL A	uthor:	гсу	3-30-07
<i>y</i>			CONT	NUED O	N VEO F	OFM NL	MBER		
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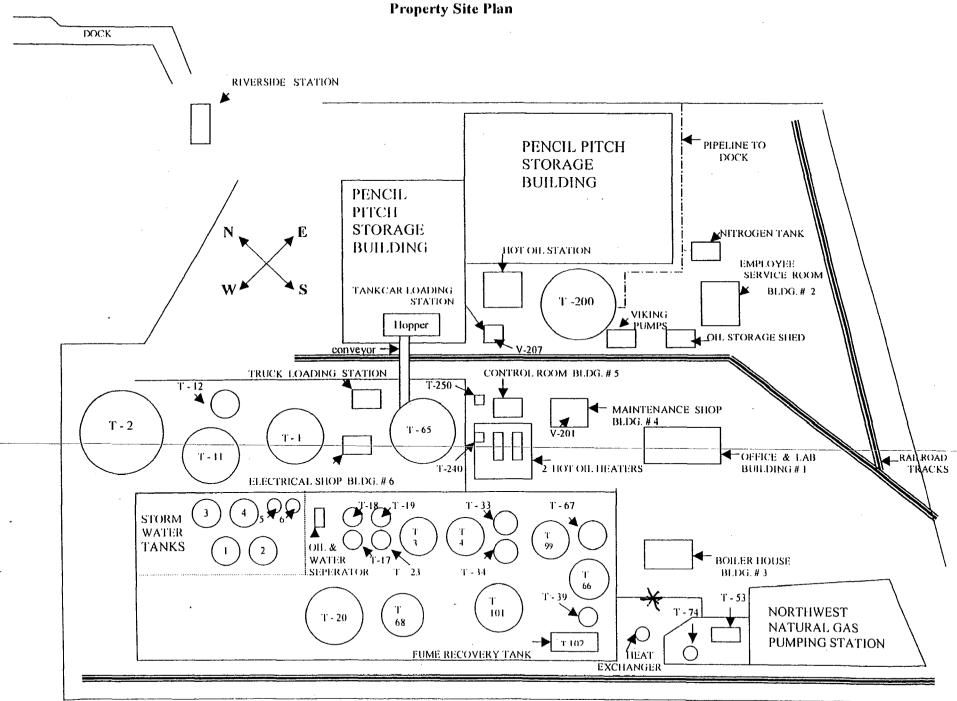


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COMPANY NAME		COMMENSATION DATE START TIME BND TIME								
Koppers Inc.			14	-24			06	302.5		7/
7540 N.W. St. Helens	Rd.		1	0	15	300	46	)(4.4	COMMENTS	
			7	10	18	10	10			
CITY	STATE	i ZIP	2	200	15	w	113			
Portland	OR	97210	<del></del>		100	<b>-</b>	-			
PHONE (KEY CONTACT)		D NUMBER	3	3	3	3	5			
503-286-3681	26-29	30	.4	3	10	10	10			
PROCESS EQUIPMENT		OPERATING MODE	· 5	10	15	10	17	>	****	~
Fume Recovery System		Operating hours	6	<u></u>		<i></i>	5			
CONTROL EQUIPMENT		OPERATING MODE	-	3	10	57	2			
	1		7							
DESCRIBE EMISSION POINT			8							
22inch diameter stack			9							
on top of recovery tank.			10.							
HEIGHT ABOVE GROUND LEVEL		ELATIVE TO OBSERVER	-		· ·					
25 ft.	ser 11f	t. <sub>End</sub> same	11				•	<u> </u>	`	_
DISTANCE FROM OBSERVER	DIRECTION	FROM OBSERVER	12				7			
SIEN 80 FT END Same			13							
DESCRIBE EMISSIONS of Time	3		14					<del></del>		
Stark Syd In Co	is water	DROPLET PLUME		-				<del></del>	·	
Sunth to Engany	I		15					·····		
POINT IN THE PLUME AT WHICH OPACIT	Y WAS DET	TERMINED	16	1	1	1	1			
sun Above Stack	ina S	ema	17							
DESCRIBE PLUME BACKGROUND			18						<del></del>	
sm Trong Hillside	ina 🗲	ema	-							
PACKEROUND COLOR		TIONS /	19							
STENCEN ENGENE   WIND SPEED   SIER L MPh END SAME	Start /U	udy Dome	20					• ,		
Smal male For Same	Smr 5	Se in Samo	21							
AMBIENTTEMP	WE: BULB	TEMP : RM, percent	22							
Star 507 Enc 5/7	43	75 75	-					<u> </u>	··	
SINCE SOURCE LAYO	UT SIGETI	H Draw North Arrive	23							
with C			24				<u>.                                    </u>	<u> </u>		<u> </u>
Sun 🗢			25		-					
Wind			28					· · · · · · · · · · · · · · · · · · ·		
							<del></del>		<del></del>	
<u> </u>	E-798215	Point	27							
			28							
	ļ		25							
		}	30							
·			<u> </u>							
	. !	. •	CESE	VER'S A	MAKE (FI	ONT)	-1517	_		
	Observor	5 Pasition		MATERIAL STATES					DATE	
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			ONGA	MEATIC	7					
Sun Locate	en Line			ppers	Inc.				DATE	
ADDITIONAL INFORMATION	1//	12 /10	Yaki	ma Cl	ean A	ir A	thor:	ity	9-30	07
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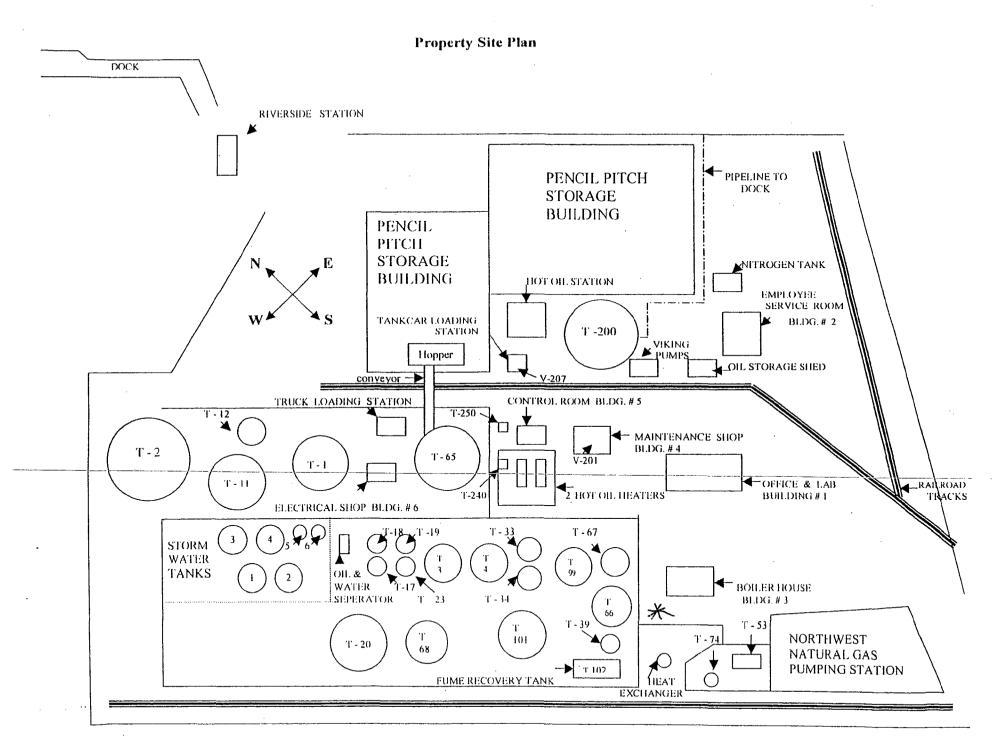


COMPANY NAME			CESE	WATION	DATE		START		END TIME
Koppers Inc.			SEC.	1/2/	18	0/	060	25111	0611
STREET ADDRESS 7540 N.W. St. Helens	Rd.	,		0	15	30	45		COMMENTS
		*	1	5	5	5	5		
CITY	STATE	ZIP	2	3	5	5	3		
Portland	OR	97210	3	5	10	11	5		
PHONE INEY CONTACT)	26-2930	ER	4	177	10	10	1/2		
503-286-3681	20-2930		-	12	11/	11/	10		
PROCESS EQUIPMENT		RATING MODE	• 5	5	5	10	5		
Fume Recovery System		PATING MODE	6	10	10	5	5		
CONTROL EQUIPMENT	OPE	PATING MODE	7	16	/ >_				
			-		<del> </del>				
DESCRIBE EMISSION POINT									
22inch diameter stack			9						
on top of recovery tank	•		10.						
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE	TO OBSERVER	11						
25 ft. DISTANCE FROM OBSERVER	DIRECTION FROM	OBSERVER	12		<b></b>	<u> </u>	·		
SER TOTTER GAME				<del>                                     </del>					
DESCRIBE EMISSIONS			13						
SER FUNIGATING	Ero SAN	10	14						
SIER Whiles Same	IF WATER DROP!	PILIME	15						
POINT IN THE PLUME AT WHICH OPAC	TY WAS DETERMINE	Detached C	16						
son Tod of Stack!	Februsania	re	17			-			
DESCRIBE PLUME BACKGROUND	100		18						
SIENT THE ESHIPSIAN BACKGROUND COLOR			19						
Som GREEN EN Sante	Sussing	En Same	20					-	
SIEN D/M ENGAMP	STERN NONE	En Same	21						
SIER 45 F END SAME	WET BULS TEMP	RH. percent	22					-	
sar 70 / sro Jamy	7//	1/0	23						
with C	YOUT SKETCH	Draw North Arrow	24				_		
Plume Sun ————————————————————————————————————			25						2
Wind -		_	25	· ·					· · · · · · · · · · · · · · · · · · ·
	Zenesian Point		27						
	, , , , , , , , , , , , , , , , , , ,		28						
			29	1	<del>                                     </del>				
	ĺ				-	<del> </del>			
			30	<u></u>		<u>L</u>	<u> </u>		
	0			AVER'S ו די יוידי			-1517		
	Observer's Positio	on		AVER'S			2/		DATE 1/0-
1,	w. 1			<u>1</u> /5	K	//			3-18-07
<u> </u>				NEATO					<del>-</del> · · · <del> </del>
Sun Loca	rigo Cine			ppers					! DATE
ADDITIONAL INFORMATION			Yaki	ima Cl	ean 1	Air A	uthor	ity	9-30-01
						2014 42			
, <u>, , , , , , , , , , , , , , , , , , </u>	<del></del>		- CONT	INUED O	N VEO	-CHOM NE	MBEA		



COMPANY NAME				PWATION	0478		1 674 67	The	
Koppers Inc.				6-1	13-	07		600	OCOC
7540 N.W. St. Helens	Rd.		7	0	15	3	46		COMMENTS
			1	0	0	0	0		
CITY	STATE	2P	2	0	0	5	P		
PHONE (KEY CONTACT)	OR	97210 D NUMBER	3	5	5	37	5		
503-286-3681	26-29		.4	5	5	5	0		
PROCESS EQUIPMENT	-	OPERATING MODE Operating hours	- 5	0	1	0	0		
Fume Recovery System		OPERATING MODE	6	0	5	0	0		
	,		7	0	5				
DESCRIBE EMISSION POINT			8						
22inch diameter stack			9						
on top of recovery tank			10.						
HEIGHT ABOVE GROUND LEVEL 25 ft.		ELATIVE TO OBSERVER	1,1					-	
DISTANCE FROM OBSERVER	DIRECTION	FROM OBSERVER	12						
Start 70 End Carry	Son Ma	5/ Ero Gagne	13						
DESCRIBE EMISSIONS SIEG	Eng S	Me	14						
EMISSION COLOR	IF WATER	DROPLET PLUME	15						
POINT IN THE PLUME AT WHICH OPACE			16						
soft above stack			17						
DESCRIBE PLUME BACKGROUND			18						
SINT TREES - HT / 1/5 1 da BACKBROUND COLOR	SKY SONO		19						
SER GRA EN SAME	Ser /	wake Same	20					_	
WIND SPEED	WIND DIFE	STION -	21				·	<u> </u>	
SIER GMOG END SAME	WET BULB	TEMP : AH. percent	22						
Sien 59° F End Same	4	7 F 65 %						·	<del>-:</del>
States SOURCE LAY	OUT SIGET	H Onew North Arrow	24						
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Sun + Wind -			25	<del></del>	-		i.	•	
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	\$-Mession	Point	27						
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	Observer:	Position	OBSE	VER'S	ICH DA	E			DATE
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Sun Loos			Ko	NZATION apers	Inc.				
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	-	load Mg	Yakı	ma CI	ean P	LL M		- + <u>I</u>	1-30-01
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COMPANY NAME	,				No.					
Koppers Inc.			0	7-/	DATE	7	START THE BIG THE			
7540 N.W. St. Helens	Rd.		7	0	15	30	46		COMMEN	
			1	0	0	5	5			-
ar	STATE	239	2	5	ىر	5	5			
PHONE (KEY CONTACT)	OR	97210 D NUMBER	3	<i>y</i> -	3	5	3			
503-286-3681	26-29		.4	0	0	1	0			
PROCESS EQUIPMENT		OPERATING MODE	· 5	~	5	0	5-		<del></del>	
Fume Recovery System		Operating hours	6	0	0	5-			<del> </del>	
CONTROL EQUIPMENT		OPERATING MODE	7	5	<u></u>	2.			<del></del> -	<del></del>
DESCRIBE EMISSION POINT									***	m <u> </u>
22inch diameter stack	· · · · · · · · · · · · · · · · · · ·		9							
on top of recovery tank		. ,	10.							<del></del>
HEIGHT ABOVE GROUND LEVEL	HEISHT	ELATIVE TO OBSERVER	11						,	<del></del>
25 ft. DISTANCE FROM OBSERVER	DIRECTO	N FROM OBSERVER	12				•	<u> </u>	-	
Son 701 End Same	STER W	est in Same	13						··· /···	
DESCRIBE EMISSIONS SER OF TIMES	/		14						<del></del>	<del></del>
EMERION COLOR	: IE WATER	DROPLET PLUME	15							
SIER WAFE END SOME POINT IN THE PLUME AT WHICH OPAGE	Attached :	Detached C	16						· · · · · · · · · · · · · · · · · · ·	
SHOTON OF STACK IF	End S	ame	17						•	
DESCRIBE PLUME BACKGROUND			18							
Sun Trees Hillside BACKGROUND COLOR	Ene L		19			•			<del></del>	
STEN GREEN EN SAME			20		<del> </del>				<del></del>	
WIND SPEED	WIND DU	ETION , Samo	21				<u> </u>	<u>.</u>	<del></del>	
SIER 2-3 Moheno Santal  AMBRENT TEMP  SIER LS F END Sange	WE: BUL	B TEMP AH. Dercent	22							
sien 15% Eno Garre	36	F 7390	23					· · · · · ·	<del></del>	
STREET SOURCE LAY	OUT SIGET	CH Onew North Arrow	24							<del></del>
Plume Sun -		$\Theta$	25						•	
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	<u> </u>	an Point	27							
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Koppers Inc.				lug	18/	eag	10	700	0706
7540 N.W. St. Helens	Rđ.	· · ·	7	0	75	20	4		COMMENTS
			1	7	10	4	5	·	
ary	STATE	2P	2	-5	5	3	5		
PHONE (KEY CONTACT)	OR	97210 D NUMBER	3	3	7	5	10		
503-286-3681	26-29		,4	10	10	5	5		
PROCESS EQUIPMENT		OPERATING MODE	· <b>S</b>	5	5	10	10	,	
Fume Recovery System	<del></del>	Operating hours OPERATING MODE	6	5	Z	5	10		
CONTROL EGGERMENT		OF ENVING MODE	7	10			10		
DESCRIBE EMISSION POINT			8						
22inch diameter stack			9						
on top of recovery tank			10.					**	
HEIGHT ABOVE GROUND LEVEL 25 ft.		ft. End same	11					-	
DISTANCE FROM OBSERVER	DIRECTO	N FROM OBSERVER	12				•	· · · · · · · · · · · · · · · · · · ·	
Start 70 End Same	Son W	est in same	13						<del></del>
SER OF LACT	Ere 5	meny/	14						
EMISSION COLOR	IF WATER	DROPLET PLUME	15						
POINT IN THE PLUME AT WHICH OPAGE	Y WAS DE	Detached C	16						
smlfTabour Stock	G- 5	nne	17						
DESCRIBE PLUME BACKGROUND Start 1//5/0 4/RECS	·- C	a mil	18						
BACKGROUND COLOR	SAY SON	DITIONS	19						
STER BRUILLAND SOME	Sign Of	sercas 5 g m	-					• .	
	Sen N	w in Sance	21						
AMBIENT TEMP Start 47 FEnd 46 F	WET BUT		22						
			23						
Stack SOURCE LAY	OUT SICET		24				-		
Sun +		<b>&gt;</b>	25	·					
Wind			28	·					
X	Emusic	n Point	27						
			23						
	j		23						
	/		30						
				IVER'S N			1677		)
	Observer	's Position		Tur			2121/		DATE
14			10	1/1					84807
Sun Local	X	>	Kor	pers	Inc.				
ADDITIONAL INFORMATION	5)		CHU	ma Cl		ir A	ıthori	tv	9-30-07
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		ليهيين والمراجع والم							

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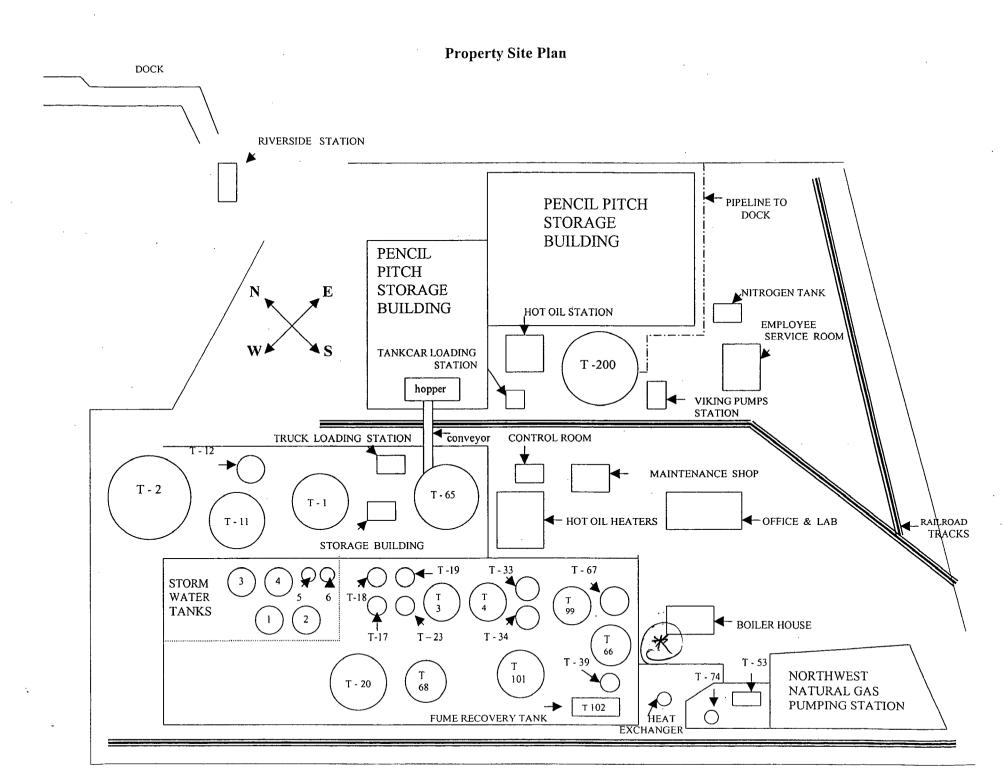
COMPANY NAME				MATION	DATE		START		
Koppers Inc.				0-2	0-0	7		700	DE TAR
7540 N.W. St. Helens	Rd.		1	0	15	20	4	OA4.	COMMENTS
			1	5	7	3-	0	<b> </b>	
CITY	STATE	239	2	0		1	0	<u> </u>	·
Portland	OR	97210	3	2-	2	02	5		
PHONE (KEY CONTACT) 503-286-3681	26-29	D RUMBER 30	4	5	5	4	5		
PROCESS EQUIPMENT		OFERATING MODE	. 5	7	0	5	0		
Fume Recovery System		Operating hours	6	مر	سو		1		
CONTROL EQUIPMENT	ļ	OPERATING MODE	7	2_	2	<u>//</u>	7		
			-	-5	2	9	0		
DESCRIBE EMISSION POINT 22inch diameter stack			•						
ZZIICII GIMICGOI SOCOII			9						
on top of recovery tank			10.						
25 ft.			11						
DISTANCE FROM OBSERVER	DIRECTIO	N FROM OSSERVER	12					<u> </u>	
Start 70 End Same	Stert	End	13				:		<del></del>
DESCRIBE EMISSIONS	<u></u>		14					<del></del>	
		DROPLET PLUME	15					<del></del>	<del></del>
Sun White End Same	ATRONEC	Detacted C							
POINT IN THE PLUME AT WHICH OPACT	Y WAS DE	BANC	16						·
	- C	Jame	17	,					
DESCRIBE PLUME BACKGROUND Sun TRESHILLS INC		a do	18						
BACKGROUND COLOR	SAY SON	PTIONS/	19						
STER GRAVE ENG. SARARE	SHIP OF	oudy in Same	20						
Start 10-11 End Same			21						
AMBIENT TEMP	WET BULL	TEMP : AH, percent	22					,	·
Sen 47 f End 479		149 8796	23					<u>.</u>	·
Stack SOURCE LAYS	XJT SKET	H Draw North Arrow	24					<del> </del>	
Ptume							-		
Sun			25						**
			25						· · · · · · · · · · · · · · · · · · ·
	Emest 6	n Point	27						
	1		25						
		·	29						
· •	ĺ		30						
			OBJET	IVER'S N	AME (PR	UNT)	<u> </u>		
1	Observor	S Position					-1517	2	
	<b>7</b>		OBSE	WEATS S	1000	\$//			DATE
140	-		DROM	<b>desties</b>					10-20-01
26 pos	- LA	>	Kor	pers	Inc.				
ADDITIONAL INFORMATION		1-1	Vaki	ma Cl	ean A	ir A	uthor:	ity	2-30-08
LOGA INGLY	///-	In TRUCKS							7000
			com	MUED O	N YED F	OFM NU	MEEN		
									<u></u>

**Property Site Plan** 

RIVERSIDE STATION

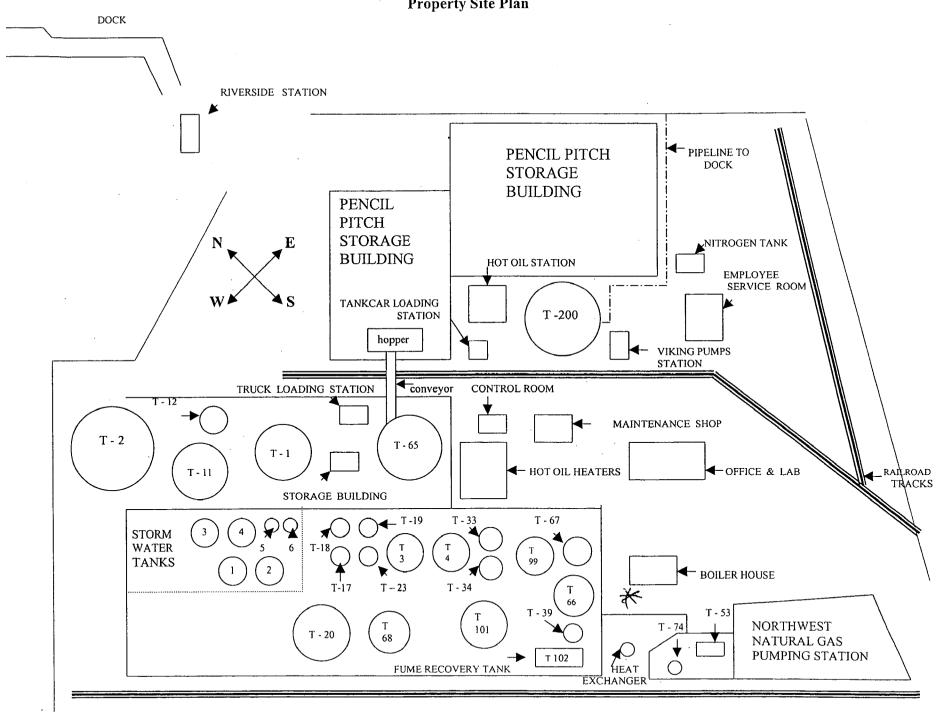
DOCK

Roppers Inc.		OBSERVATION DATE  11-20-07				START	TIME 5 Gai	0656
STREET ADDRESS 7540 N.W. St. Helens Rd.		SEC	0	15	30	45		COMMENTS
		1	10	10	15	10		
CITY	STATE ZIP	2	W	15	150	15		
PORT LAND	OR 97210	3	15	15	15	10		
503-286-3681	26–2930	.4	10	15	15	10		
PROCESS EQUIPMENT Fume Recovery System	OPERATING MODE Operating hours	. 5	15	13	10	10		
CONTROL SOUIPMENT OPERATING MODE		6	10	10	10	15		
		7	15	15				
DESCRIBE EMISSION POINT 22inch diameter stack		8						
		10.						
on top of recovery tank	HEIGHT RELATIVE TO DESERVER	11					<del>-</del> .	
25 ft.	DIRECTION FROM DESERVER	12		· · ·	-		<u> </u>	· · · · · · · · · · · · · · · · · · ·
sun 78 ft Eno Same	sunlikest Ensame	13						
DESCRIBE EMISSIONS	<i>f</i>	14						
SIN LOFTING EMISSION COLOR	FIF WATER DROPLE, PLUMP	15						
SIER WhiTE SING SAME POINT IN THE PLUME AT WHICH OPAGE	Attached C Detached C TY WAS DETERMINED	16						
surlog of Stack I fless Same		17						
DESCRIBE PLIME BACKGROUND		18						
SIER TREES HILLSI'NG C.		19						
STATE CALLANDERS SOME WIND SPEED STATE 2-4 MPHEND SOME AMBIENT TEMP STATE FEND SOME	WING DIRECTION	20					-	
son 2-4 mphero Samer	son South in Same	21						
SOUR 4/ FEND Sames	WET BULB TEMP RH. Dercert	72			_		<u> </u>	
Stack SOURCE LAY		23						
Pturne		24				-		
Sun +		25				<u> </u>		
		25						<u> </u>
	Emession Point	27						<del></del>
		28						
		30						
			RVER'S I	ANE O		l		
	Observer s Position	T.	J. Tur	mer	Cert.	-1517		
			BVFR'S					DATE 11-20-07
140"			NEATION	1	7-4-	-		
Sun Location Line ADDITIONAL INFORMATION			ppers			<del></del>		DATE
Loading Trucks.			Yakima Clean Air Authority 3-3008					
8			NUED O	N VEO F	ORM NU	MEER		
		<u></u>						

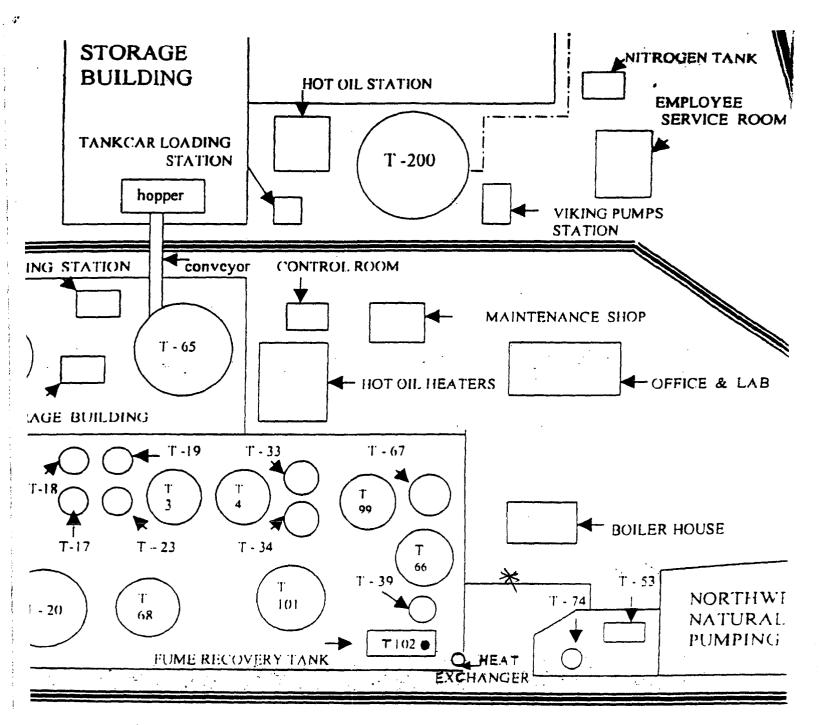


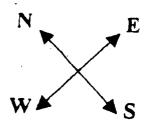
COMPANY NAME			OBSERVATION DATE				START	-	END TIME
Koppers Inc.			12-20-07				06400		0646
STREET ADORESS 7540 N.W. St. Helens	Rd.		SEE	0	15	30	45		COMMENTS
			1	10	15	15	5		
CITY	STATE	ZIP	2	15	13	15	10		
Portland	OR	97210	3	10	10	15	15		
PHONE (KEY CONTACT)	SOURCE ID NUMBI	ER		10	10	10	-		<del></del>
503-286-3681	26-2930		.4	15	10	10	15		
PROCESS EQUIPMENT		PATING MODE	- 5	15	15	15	15		
Fume Recovery System		rating hours	6	11	10	15	13		
CONTROL EQUIPMENT	OPS	RATING MODE	7	777	10	~			
			<u>                                     </u>	15					<del></del>
DESCRIBE EMISSION POINT			8						
22inch diameter stack	<del> </del>		9					, ,	
on top of recovery tank	<u> </u>	·	10.						
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE	TO DESERVER	11					-,	
DISTANCE FROM OBSERVER	DIRECTION FROM	OBSERVER :	12					···································	
25 ft. DISTANCE FROM OBSERVER SER 701 End Same	son west	-Same	13						
DESCRIBE EMISSIONS	<del></del>		14						
son Intling	End SAINE	Bung							
EMISSION COLOR SIENT WILL FIND SOME AT WHICH OPACE	Attached I	Detached C	15						
POINT IN THE PLUME AT WHICH OPACE	TY WAS DETERMINE	D ,	16						
sm Top of & Tack 171	Eno Gan		17						
DESCRIBE PLUME BACKGROUND	- Cam	0	18						
DESCRIBE PLUME BACKGROUND SINT TAXYS HILLS IN UP BACKGROUND COLOR SINT GREEN END SAME WIND SPEED SINT TAXY END SOME AMBIENT TEMP SINT 38 F END SOME	SKY CONDITIONS		19						
Som GREEN EN SAME	SunOVERCE	En Sance	20					-	
SER TRACTER SAME	Speri S.F.	En SANO	21						
AMBIENT TEMP	WET BULS TEMP	RH, percent	22						
Som 38 & End Josephy	35 F	120	23					· ·	
STECK SOURCE LAY	OUT SKETCH	Draw North Arrow	24						
Ptume Sun ————		$\bigcirc$	25			<u> </u>	-		· · · ·
Wind			-	· ·				<u> </u>	
	7.		26			-			·
	Emession Point		27				-		
			28						
			29						
,*			30						
				RVER'S I					
لر	T.J. Turner Cert1517								
			OESE	PVERS	NO TO				JQ-2007
140"				NEXTON					<del></del>
Common Line				ppers	Inc.				DATE
LOSA ING TRUCKS			Yaki	FIED BY	ean A	ir A	uthor:	ity	3-30-08
LUAR ING IF	AUCK G								
1 .			CONT	NUED O	N VEO F	OFM NU	MRER		
									<del></del>

## **Property Site Plan**



VISIBLE EMISSION OBSERVATION FORM No. COMPANY HALE WITCH SAFE Roppers Inc. 0837 7540 N.W. St. Helens Rd. 46 COMMENTE 10 10 10 STATE 2 15 K OR 97210 Portland 3 PHONE MEY CONTACT) SOURCE ID NUMBER 503-286-3681 26-2930 .4 PROCESS EQUIPMENT OPERATING MODE · 5 UC 1 Fume Recovery System Operating hours 6 CONTROL EQUIPMENT OPERATING MODE 7 DESCRISE EMISSION POINT . 22inch diameter stack . on top of recovery tank. 10. HEIGHT ABOVE GROUND LEVEL HEIGHT RELATIVE TO GESERVER 11 25 ft. Smr llft. and same DISTANCE FROM DESERVER DIRECTION FROM CESERVER 12 SER WEST SER TO Eno Saper in Some 13 DESCRIBE EMISSIONS 14 Bane IF WATER DROPLET PLUME 15 San White and Sa MA MERCE : 16 POINT IN THE PLUME AT WHICH OPACITY WAS DETER 17 18 MEES In San 19 BAN-GLEEP Sam in Same 20 WIND DIRECTION WIND SPEED 21 Sun 9 MP som South in Same AMBIENT TEMP WET BULL TEMP 22 23 SOURCE LAYOUT SKETCH 24 35 Sun Wind 28 Emesion Point 27 28 20 CREWIVER'S NAME (PRINT) T.J. Turner Cert.-1517 To say The DATE OPENIENTON Koppers Inc. ADDITIONAL INFORMATION Yakima Clean Air Authority CONTINUED ON VED FORM NUMBER ţ

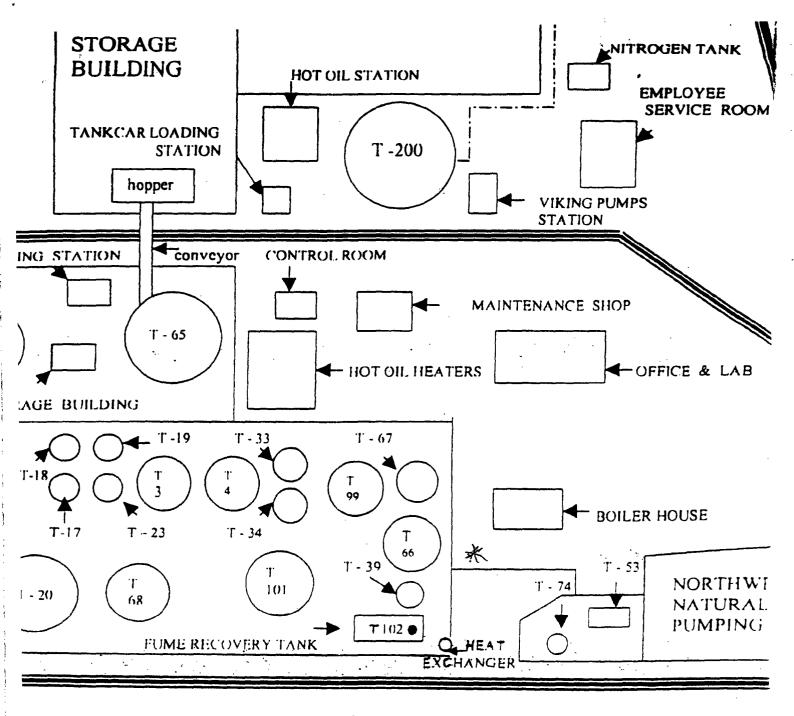


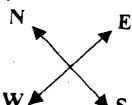


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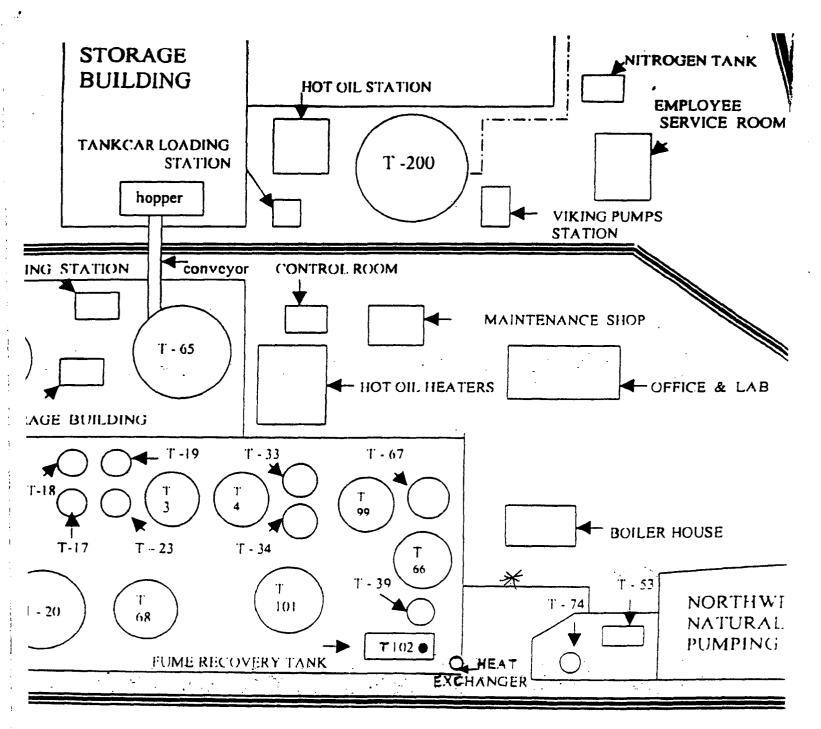
COMPANY NAME			PIVATION		3 /	START TIME		END THE	
Roppers Inc.			2-22-06			07.	50	075/	
7540 N.W. St. Helens	Rd.	320	0	15	30 ,	45		COMMENTS	
		1	10	10	10	10			
CITY	STATE ZP	2	10	10	15	15			
Portland	OR 97210	3	15	13	15	15			
PHONE (KEY CONTACT) 503-286-3681	SOURCE ID NUMBER 26-2930	. 4	15	15	10	10			
PROCESS EQUIPMENT	OPERATING MODE	. 2	10	10	10	10	P	-	
Fume Recovery System	Operating hours	6	119	15	15	10			
CONTROL EQUIPMENT	OF EARLING MODE	7	15	15		,			
DESCRIBE EMISSION POINT		8							
22inch diameter stack		9						·	
on top of recovery tank		10							
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO DESERVER			·			-, -	· · · · · · · · · · · · · · · · · · ·	
25 ft. DISTANCE FROM OBSERVER	STEET END SAME	12							
Son 80 T Ere Same		:3	<u> </u>						
DESCRIBE EMISSIONS						l			
Stan / , NO	F WATER DROPLET PLUME	14	!						
SIER Whilt ENG SAMP POINT IN THE PLIME AT WHICH OPAGE	Attached C Detached C	15							
POINT IN THE PLUME AT WHICH OPACT	TY WAS DETERMINED	16							
smitTahove Stock	Ent	17						-	
DESCRIBE PLIME BACKGROUND SIMPHISTAGE TREES	- Cand	18							
BACKGROUND COLOR	SKY SHOTTONS	19							
sibri/Gris Same	sorloudy to SAMO	20					• .		
son 3 moh son same	Sim NW in Same	2:							
SHERT TEMP	WET BULS TEMP AND DETERMENT SERVICE SE	22							
		23		-					
STURCE LAY	OUT SKETCH Draw North Arrow	24							
Ptume Sun ————————————————————————————————————		25							
Wind		25			· ·		· · · · · · · · · · · · · · · · · · ·		
X	Emesion Point	27							
		28	i 						
		29							
		30	<u> </u>						
	0		AVERS A			-1517	)		
	Observer's Position		RVER'S					DATE	
140	· /		<u> </u>	/n		-11		2-22-06	
Sun Locati	on Line		NÉATION opers				•		
ADDITIONAL INFORMATION			CERTIFIED BY DATE						
· · · · · · · · · · · · · · · · · · ·		Yaki	ma Cl	ean <i>l</i>	ur Au	ıthori	cy	3-30-00	
5			CONTINUED ON VEO FORM NUMBER						

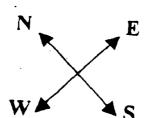
## **Property Site Plan** DOCK RIVERSIDE STATION PIPELINE TO DOCK PENCIL PITCH **STORAGE** BUILDING **PENCIL** PITCH **STORAGE** NITROGEN TANK **BUILDING** HOT OIL STATION EMPLOYEE SERVICE ROOM TANKCAR LOADING T-200 STATION hopper VIKING PUMPS STATION -conveyor TRUCK LOADING STATION CONTROL ROOM MAINTENANCE SHOP T - 2 T - 65 \_RAILROAD TRACKS **◀**−OFFICE & LAB **◀**— HOT OIL HEATERS T-11 STORAGE BUILDING T - 67 T - 33 STORM WATER **TANKS** BOILER HOUSE T - 23 T - 34 T-17 **NORTHWEST** T - 74 101 T - 20 68 NATURAL GAS **PUMPING STATION** T 102 HEAT FUME RECOVERY TANK <del>EX</del>CHANGER



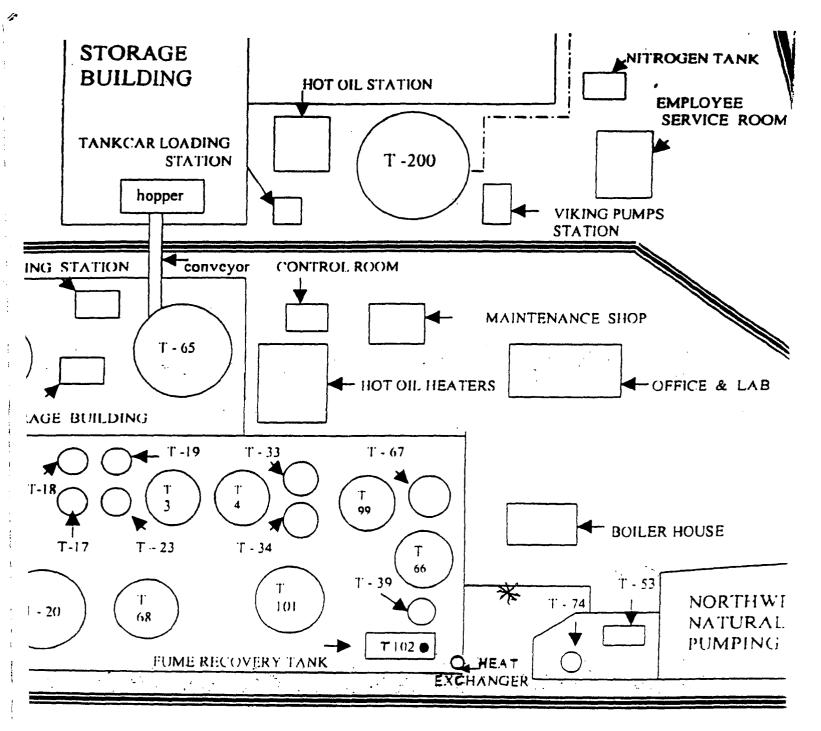


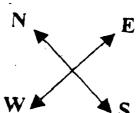
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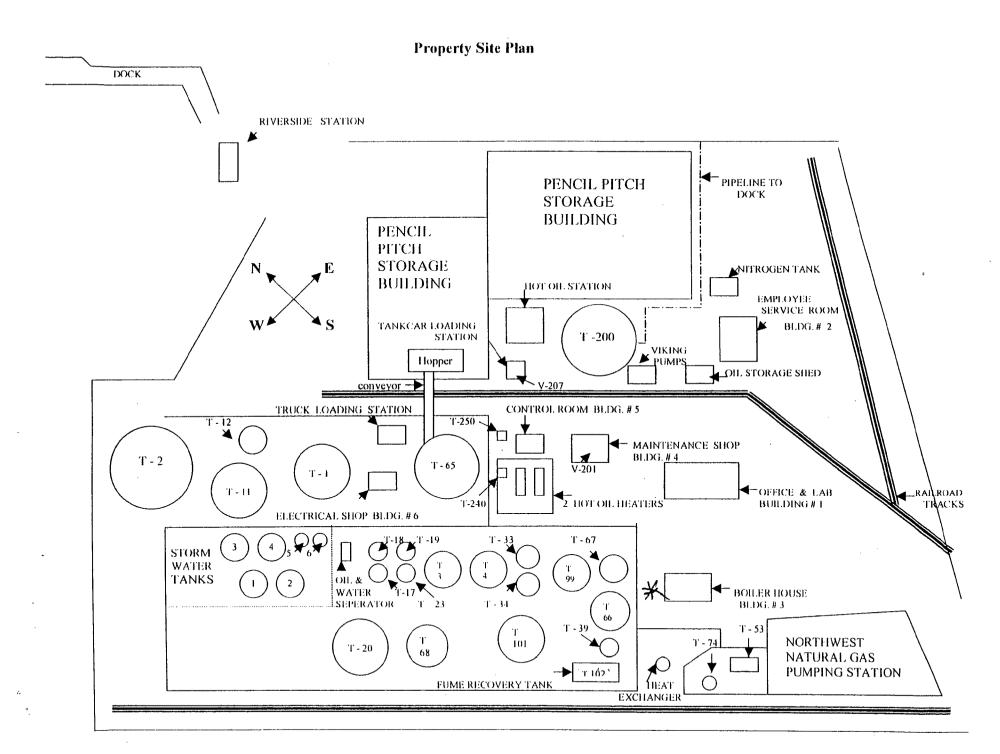


SCHOOLS JOC.  TTT 7540 N.W. St. Helens Rd.  DPY 1 9 9 9 20 44 COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 5 5 5 5  PRICE LAND COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 0 0 0 0  PRICE LAND COMMADYTE  1 5 5 5 5 5  PRICE LAND COMMANDYTE  1 5 5 5 5 5  PRICE LAND	COMPANY NAME		COMMUNICATION DATE   START THE   END THAT							
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DESCRIBE EMSSION POINT  OR LOD OF TECOVERY Lank  HEIGHT ABOVE SROUND LEVE.  JEGHT ABOVE SROUND L				6	0	7	25	0		
DESCRIBE BASSION FORM 221ch diameter stack  On top of recovery tank	CONTROL BOOK MENT		WING MODE	7	0	5				
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Continued on vice form number	_	·		25						4 T
Observer's Position  Observer's Position  OBSERVER'S NAME (PRINT)  T.J. Turner Cert1517  OBSERVER'S SIGNATURE  ORGANIZATION  ROPPER'S Inc.  CERTIFIED BY  Yakima Clean Air Authority  OATE  7/30/06	Wire			25	-					
Observer's Position  Observer's Position  T.J. Turner Cert1517  ORGANIZATION  Kopper's Inc.  CENTIFIED BY  Yakima Clean Air Authority  OATE  9/30/06		Emission Point		27						
Observer's Position  T.J. Turner Cert1517  CRESERVER'S SIGNATURE  ORGANIZATION  Kopper's Inc.  CENTIFIED BY  Yakima Clean Air Authority  DATE  9/30/06				28					<u> </u>	
OBSERVER'S NAME (FRINT)  T.J. Turner Cert1517  OBSERVER'S SIGNATURE  ORGANIZATION  Kopper's Inc.  CENTIFIED BY  Yakima Clean Air Authority  DATE  7/30/06				29					<u> </u>	
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ORSERVER'S SIGNATURE  ORGANIZATION  Kopper'S Inc.  CENTIFIED BY  Yakima Clean Air Authority  DATE  9/30/06	1	Observer s Position	,					-1517		
Sun /		<b>&gt;</b>				TO ALL			w	
ADDITIONAL INFORMATION  CENTIFIED BY Yakima Clean Air Authority  7/30/06  CONTINUED ON VED FORM NUMBER	140	r'								
ADDITIONAL INFORMATION  Yakima Clean Air Authority 9/30/06  CONTINUED ON VED FORM NUMBER	Sun					Inc.				L DATE /
CONTINUED ON VED FORM NUMBER	ADDITIONAL INFORMATION			Yaki	ma Cl	ean A	ir A	uthori	ity	
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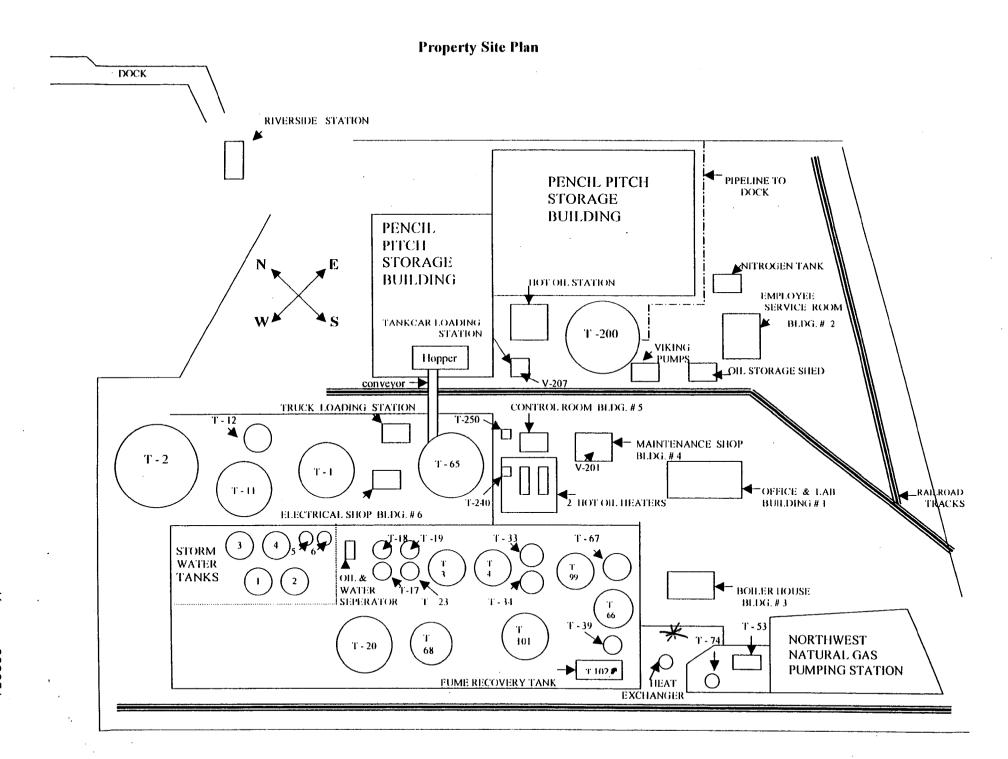


COMPANY NAME			NOTTAVA			START		END TIME
Konners Inc.			-21		26	06	003.5	0606
STREET ADORESS 7540 N.W. St. Helens	Rđ.	1 SEC	0	15	30	45		COMMENTS
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an	STATE ZIP	2	0	5	5	5		
Portland	OR 97210	3	0	0	0	5		
PHONE (KEY CONTACT) 503-286-3681	26-2930	.4	.5	5	5	0		
PROCESS EQUIPMENT	OPERATING MODE	5	5	3	3	5		
Fume Recovery System	Operating hours	6	0	0	5	0		
CONTROL EQUIPMENT	OPERATING MODE	7	<u> </u>					
DESCRIBE EMISSION POINT		8						-
22inch diameter stack		9						
on top of recovery tank		10.						
HEIGHT ABOVE GROUND LEVEL 25 ft.	HEIGHT RELATIVE TO OBSERVER	11			·			
DISTANCE FROM DESERVER	DIRECTION FROM OBSERVER	12			·	·		
sizer 75 = Emo SMARE	sun 19/5 W Enc Same	13					<u> </u>	
DESCRIBE EMISSIONS SIEN LOT / INC.	in Same	14						<del></del>
EMISSION COLORED SUBNITIONS FOR End	IF WATER DROPLET PLUME	15						
POINT IN THE PLUME AT WHICH OPAC	Attached C Detached C	16						·,
-Top of Flack	Eno Saray	17						
DESCRIBE PLUME BACKGROUND		18						
senTemps #1/19ide	SER SAME  SKY ENDITIONS  SER SER SAME  WIND DIRECTION  SER NE END SAME  WET BULB TEMP RM. DEPORTS	19				<del>                                     </del>		
SE CAXONERO SAME	Sun (Jeap En Sakly	20		<del>                                     </del>				
WIND SPEED	WIND DIRECTION	21		<del> </del>		<del>                                     </del>		· · · · · · · · · · · · · · · · · · ·
AMBIENT FEMP	WET BULS TEMP : RH. Dercent	22		<del> </del>		-		
State L4 F End L59	574 776	23		1	<del> </del>	-		
Stack SOURCE LAY	YOUT SKETCH Draw North Arrow	24						·
Piume Sun &		25				-		
Wind -		-	-			<u> </u>		· · · · · · · · · · · · · · · · · · ·
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14		29		<b>_</b>		-		
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ADDITIONAL INFORMATION	1>	Yakima Clean Air Authority 9-30-01						
TRUCK loan	ing	Taki	illed C	cail I	TT W	~~		1 30-01
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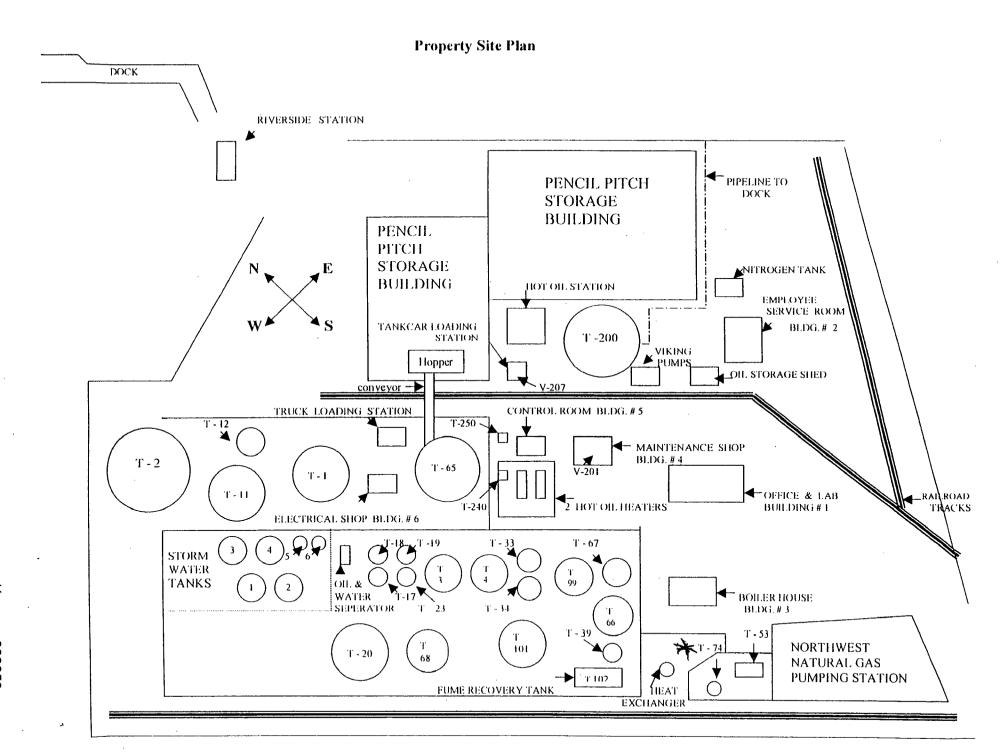


VISIBLE EMISSION ORS	ERVATION FORM
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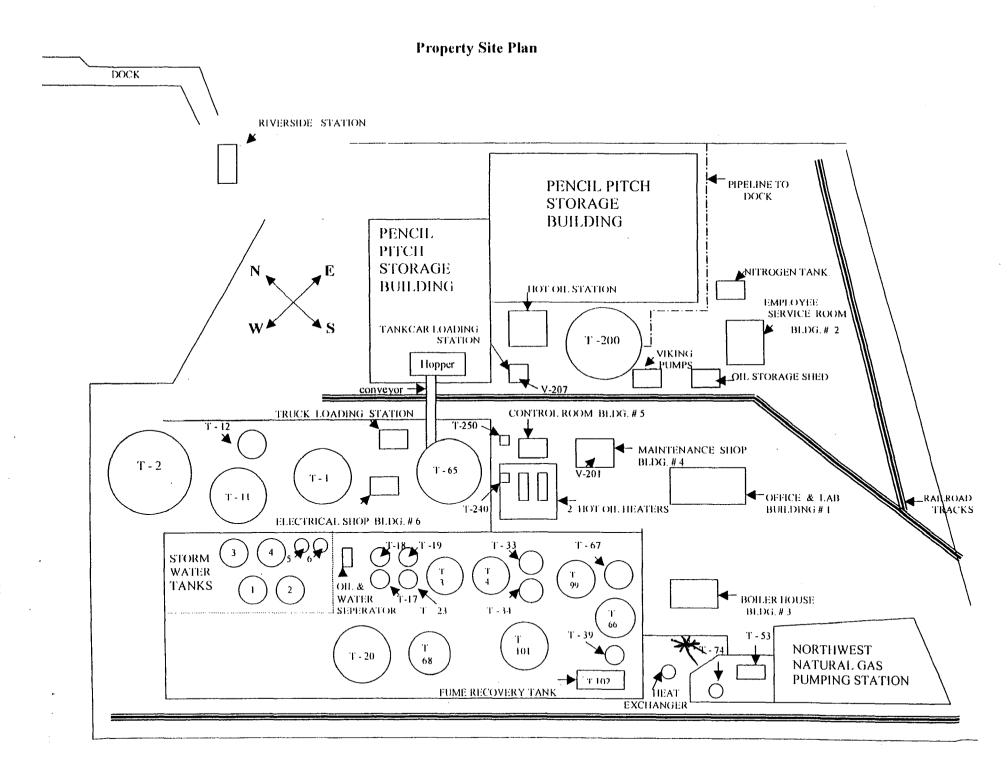
COMPANY NAME			Town	MATIO	CATE		START	140.	
Koppers Inc.				-2	6-1	20	1	C40	0/4//
7540 N.W. St. Helens	Rđ.	_	7	0	15	30	45	/-R-1	COMMENTS
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Portland	OR SOURCE ID NUMBE	97210	3	10	10	10	16		
PHONE (KEY CONTACT) 503-286-3681	26-2930	<b></b>	.4	5	5	5	10		
PROCESS EQUIPMENT	·	LATING MODE	- 5	5-	5	5.	3		
Fume Recovery System		rating hours	6	10	5	5	10		
CONTROL EQUIPMENT	OPER	ATING MODE	7		Ď		,		
DESCRIBE EMISSION POINT			8						
22inch diameter stack			9						
on top of recovery tank.			10.						
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DESCRIBE EMISSIONS	1		14						
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son White so Bame	Attached 2	Detached C	16					<del></del>	
POINT IN THE PLUME AT WHICH OPACT	end South								
DESCRIBE PLIME BACKGROUND	- Jan		17					····	
sm Teres/Hillside	en Gama	e	18			$\longrightarrow$			<del></del>
BACKGROUND COLOR	SICY CONDITIONS		19					<u>.                                    </u>	
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Koppers Inc.				FVATION 3-3		06	START	145	063	2
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DESCRIBE PLUME BACKGROUND			18						<del></del>	
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Sun -	•		25		-					
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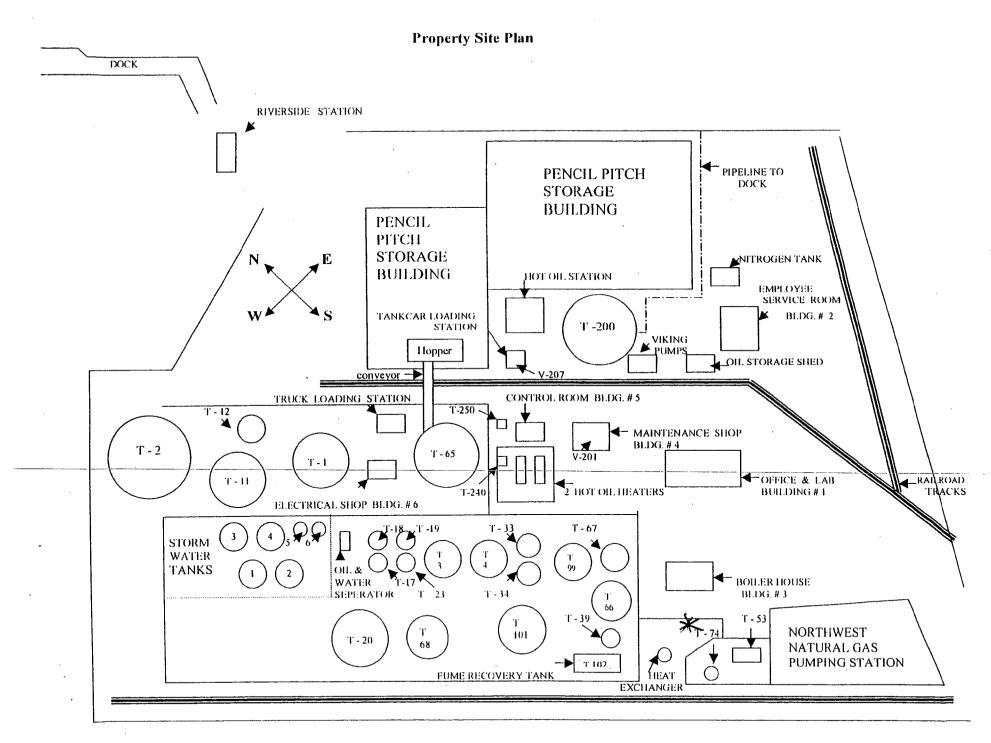
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Portland PHONE (KEY CONTACT)	OR SOURCE ID NUMBE	97210	3	10	211	210	10			
503-286-3681	26-2930		.4	5	5	0	0			
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Fume Recovery System CONTROL EQUIPMENT		rating hours	6	5	5	5	5			<u> </u>
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DESCRIBE EMISSION POINT			8							
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on top of recovery tank.			10.							
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STERT WILL THE PLUME AT WHICH OPACIT	Y WAS DETERMINED	)	16							
s=147-bove 57-	in Same		17							
DESCRIBE PLUME BACKGROUND Start Rects/ Hill gide	- Sonte		18						********	
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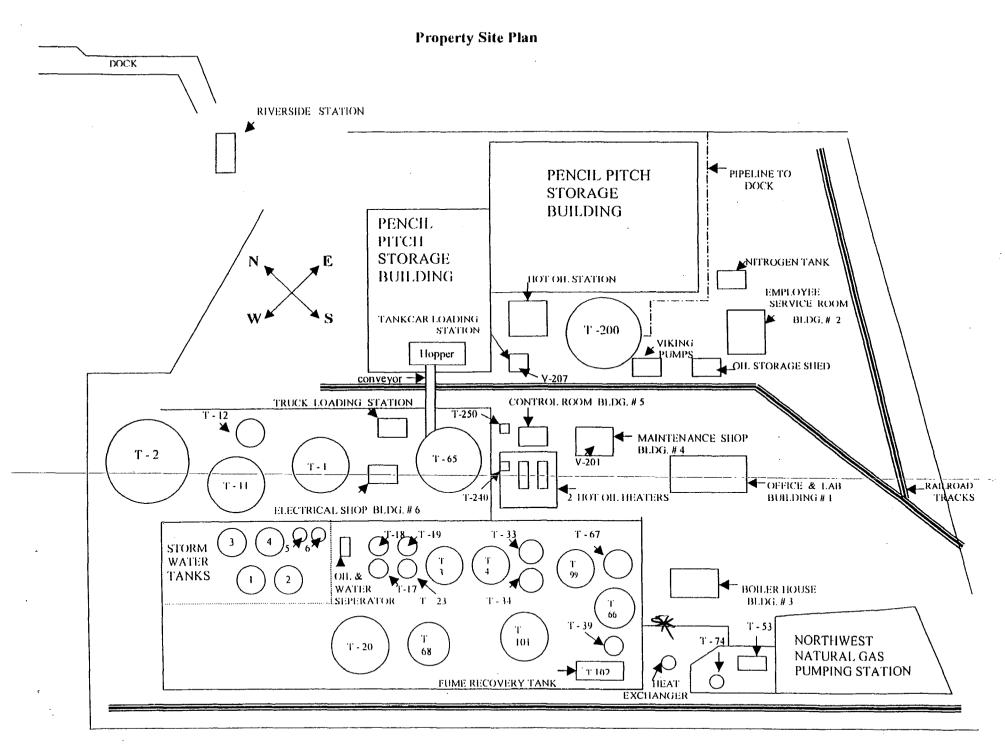
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Koppers Inc.			0/1	0/0	26	064000 0			7		
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CITY	STATE ZIP	2	10	10	10	10					
PORT LAND	OR 97210	3	10	10	10	10					
503-286-3681	26-2930	.4	5	5	5	5					
PROCESS EQUIPMENT	OPERATING MODE Operating hours	· s	5	5	10	10					
Fume Recovery System	OPERATING MODE	6	5	5	10	10					
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DESCRIBE EMISSION POINT		8	5								
22inch diameter stack		9	Ĺ								
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DESCRIBE PLUME BACKGROUND	En GANGE	18		<b> </b>	<u> </u>						
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WIND SPEED	WIND DIRECTION	20					•				
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## **Property Site Plan** DOCK RIVERSIDE STATION PIPELINE TO PENCIL PITCH DOCK **STORAGE BUILDING** PENCIL PITCH STORAGE MNITROGEN TANK BUILDING HOT OIL STATION EMPLOYEE SERVICE ROOM TANKCAR LOADING BLDG,# 2 STATION T -200 VIKING **▶**\_PUMPS Hopper \_OIL STORAGE SHED V-207 conveyor -TRUCK LOADING STATION CONTROL ROOM BLDG, # 5 T-250 -1 - 12 ■ MAINTENANCE SHOP BLDG. # 4 T - 2 T-65 V-201 T - 1 ◆OFFICE & LAB BUILDING#1 T-11 \_RAILROAD 2 HOT OIL HEATERS TILACKS T-240 ELECTRICAL SHOP BLDG. #6 T - 67 STORM WATER T 99 **TANKS ◀**− BOILER HOUSE T 23 T = 34BLDG.#3 米 T - 53 T 101 **NORTHWEST** T - 74 NATURAL GAS T 102 **PUMPING STATION** FUME RECOVERY TANK HEAT EXCHANGER

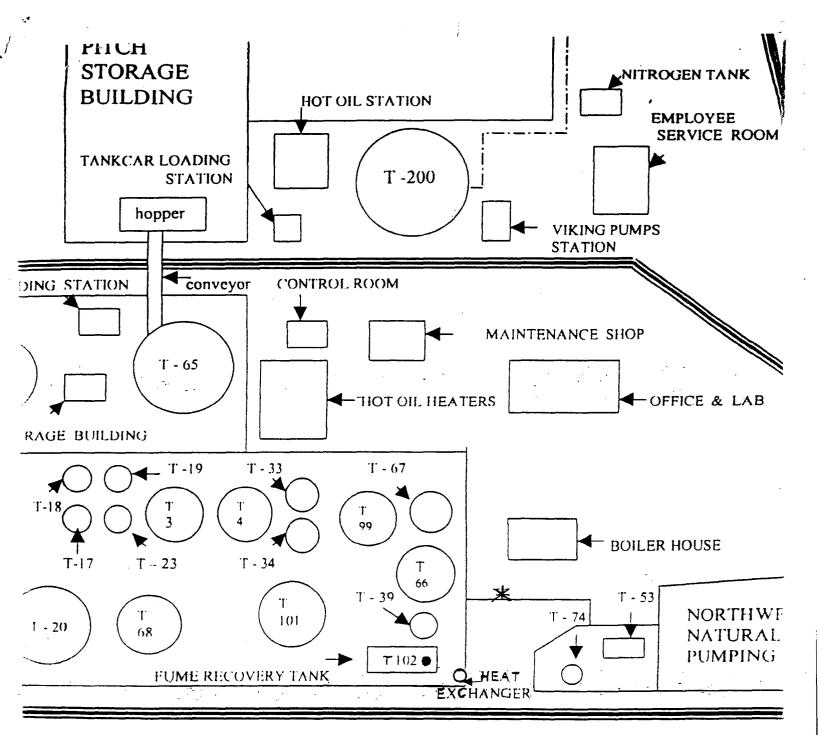
COMPANY NAME	·		_					No.		
Koppers Inc.				MATIO	29	OL	START THE BROTTHE			
7540 N.W. St. Helen	s Rd.		7	0	15	30	46	7.3/63	COMMENTS	
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CITY	STATE	2P	2	10	10	10	10			
PHONE REY CONTACT)	SOURCE	97210 D NUMBER	3	10	10	13	10			
503-286-3681	26-29		1,4	10	10	15	15			
PROCESS EQUIPMENT Fume Recovery System		OPERATING MODE Operating hours	- 5	10	3	3	10			
CONTROL EQUIPMENT		OPERATING MODE	6	5	5	10	10			
·			7				f regar			
DESCRIBE EMISSION POINT 221nch diameter stack						·	.}			
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sm Top of Stack	Ena S	ane	17							
SER Trues Hillside			18							
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STATE BRN/GINERO Same	SMIC/A	oudy wante	20					• ,		
Sun 10 MP Enc Same	Sian E	E en Same	21							
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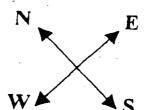


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Koppers Inc.				12/	22/	06	M	7363	0737	
7540 N.W. St. Helens	Rd.		7	1	18	30	4		COMMENTS	
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CITY	STATE	j <b>23</b> P	2	10	10	5	5			
Portland	OR	97210	3	5	7	سع	5			
PHONE (KEY CONTACT) 503-286-3681	26-29	D NUMBER 30		10	10	10	15			
PROCESS EQUIPMENT		OPERATING MODE	- 5	10	10	15	100			
Fume Recovery System		Operating hours	6	10			10			
CONTROL EQUIPMENT		OPERATING MODE	<b> </b>	-	10	10				
			7	10	15	10				
DESCRIBE EMISSION POINT										
22inch diameter stack			9					· · · · · · · · · · · · · · · · · · ·		
on top of recovery tank.			10.					<del></del>		
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25 ft.	Ser. 11	ft. <sub>End</sub> same	11			•				
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DESCRIBE EMISSIONS			14							
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Plume Sun -			25	- <del>-</del> -						
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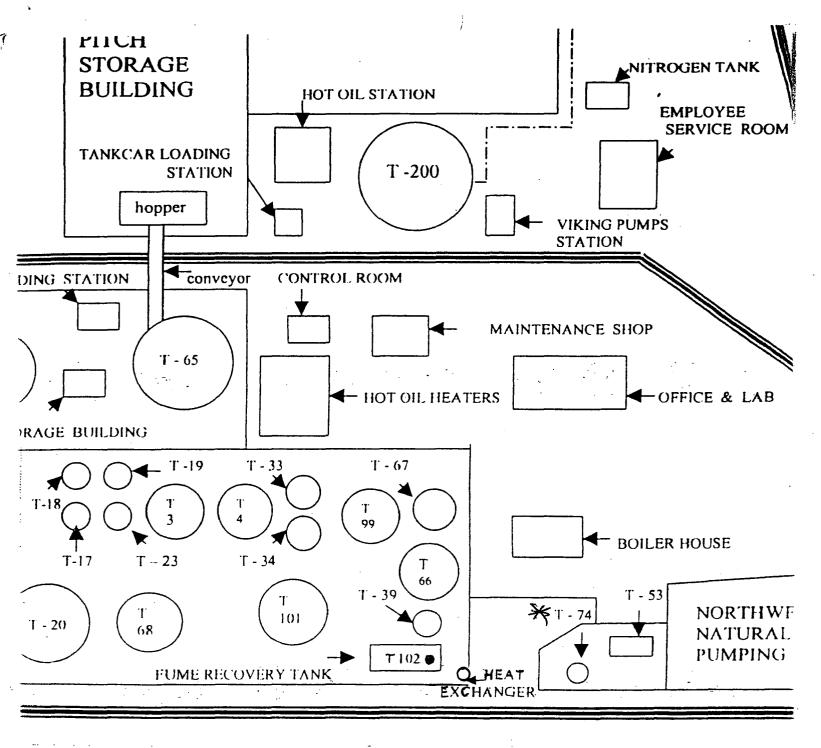


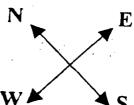
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COMPANY NAME		TVATION		1	START		0906	
Koppers Inc.  STREET ACCRESS 7540 N.W. St. Helens Rd.	32	0	15	30	46	1	COMMENTS	
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STATE ZIP	2	E	7	0	2		· · · · · · · · · · · · · · · · · · ·	
Portland OR 97210	3	مرا	12	0				
PHONE (NEY CONTACT) SOURCE ID NUMBER 503-286-3681 26-2930		2	-	0	7-	1		
303-200 3001	· 5	7	5	0		!		
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		5	12	0		ļ	<del></del>	
DESCRIBE EMISSION POINT 22inch diameter stack	8							
	9	-	<u> </u>					
on top of recovery tank. HEIGHT ABOVE GROUND LEVEL HEIGHT RELATIVE TO OBSERVER	10		<u> </u>		<u> </u>			
25 ft. SEE End SAME DISTANCE FROM DESERVER DIRECTION FROM DESERVER	11		<u> </u>			-	<u> </u>	
DISTANCE FROM DESERVER DIRECTION FROM DESERVER	12		<u> </u>					
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sun Above STACK Fine Same	17					<u>:</u>		
	18			1				
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WIND SPEED WIND STREETION CAMP	2:			ļ	<u> </u>	· ·		
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STREET SOURCE LAYOUT SKETCH DIEW NORTH ARTOW	23	ļ	<u> </u>	-				
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	OBSE	WERS.	SILVE	PE.			2-16-0	
1400	ORGANIZATION							
Sur/Legisten Line	Koppers Inc.							
ADDITIONAL INFORMATION	Yakima Clean Air Authority 4-17-05							
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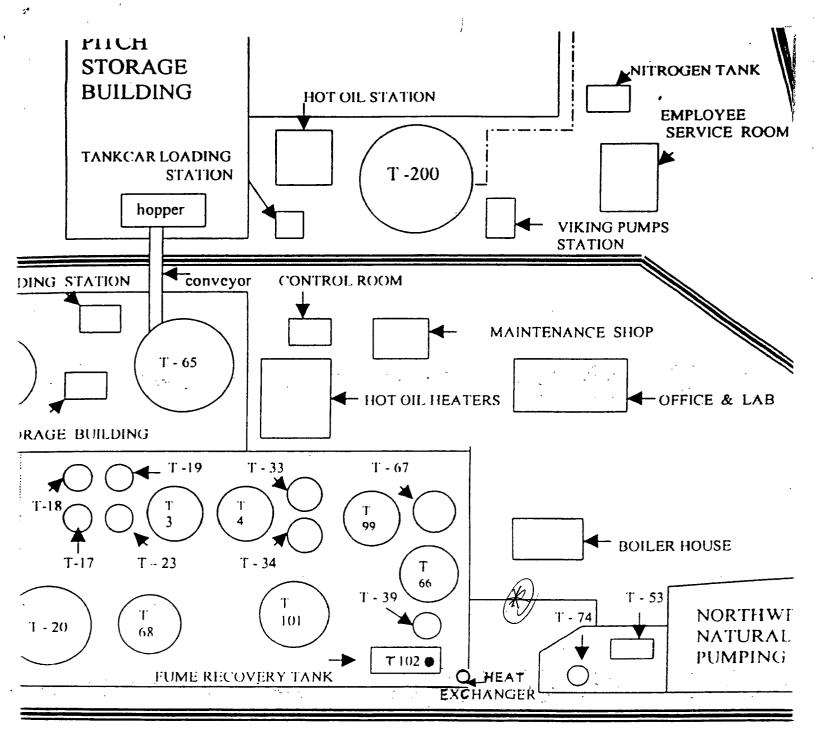
Koppers Inc.								TIME / Spi	D63	72
STREET ADDRESS 7540 N.W. St. Helens	Rd.		SEC	0	15	30	45		COMMENTS	
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CITY	STATE ZIP		2	12	15	13	100			
Portland		7210	3	15	10	00	10			
PHONE (KEY CONTACT) 503-286-3681	SOURCE ID NUMBER 26-2930		4	10	10	10	10			
PROCESS EQUIPMENT	OPERATING		- 5	15	15	15	15			
Fume Recovery System	Operation	ing hours	6	15	15	10	10			
CONTROL 2201 III.			7	15	12					
DESCRIBE EMISSION POINT			8							
22inch diameter stack			9							
on top of recovery tank		2000	10.							
HEIGHT ABOVE GROUND LEVEL 25 ft.	SEE 11ft. End	same	11		1.	-			•	
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SIEN 70+TEND SANGE	Star Wes   End	rance	13							
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EMISSION COLOR	IF WATER DROPLET PLU		15							
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DESCRIBE PLUME BACKGROUND	1		18				<del>                                     </del>		······································	
son Theres Hillsids	and and		19							
BACKGROUND COLOR State Grand / End Source	Stan OV-LRCAS	Same	20		<del>                                     </del>		<del></del>			
WIND SPEED	WIND DIRECTION		21		<del> </del>	<del> </del>	<del> </del> -	-		
AMBIENT TEMP	SEER NORTH END	SANGAH. percent		<del> </del>		<del> </del>	<u> </u>	<u> </u>		
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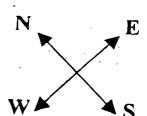




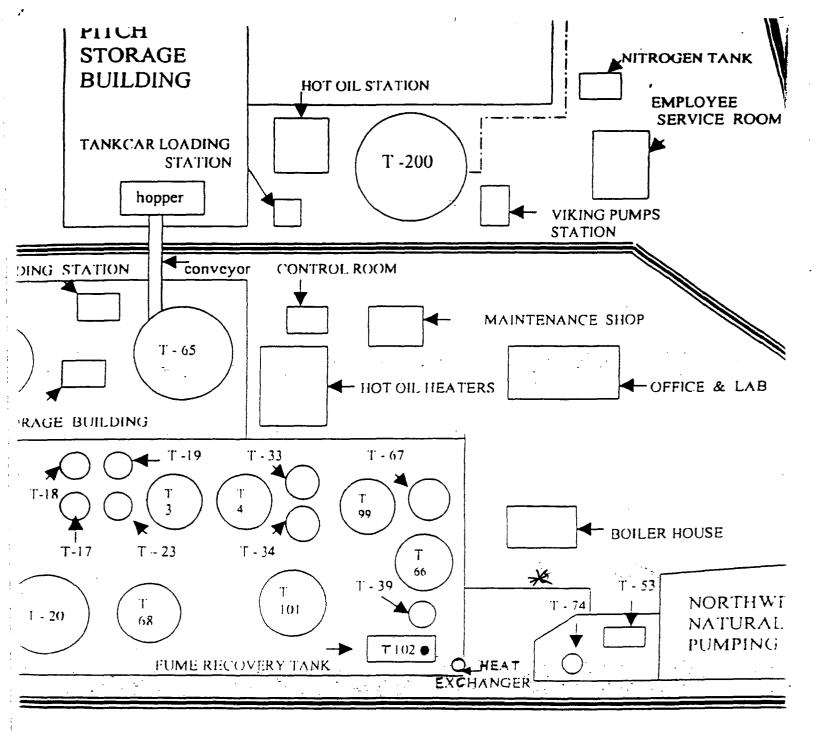
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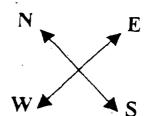
COMPANY NAME	ORSE	PIVATION	DATE	1	START	TIME	END TIME	
Koppers Inc.		1	4/2	0/	05		423.	0646
STREET ADDRESS 7540 N.W. St. Helens	Rd.	X	0 /	15	30	45		COMMENTS
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CITY	STATE ZIP	2	10	5	10	4	·	
Port land	OR 97210	3	5	5	5	7		
PHONE (KEY CONTACT) 503-286-3681	SOURCE ID NUMBER 26-2930	.4	5	5	10	11		
PROCESS EQUIPMENT	OPERATING MODE	· 5	10	5	10	17)		
Fume Recovery System	Operating hours	6	5	5	0	_		· · · · · · · · · · · · · · · · · · ·
CONTROL EQUIPMENT	OPERATING MODE	7						
DESCRIBE EMISSION POINT		8						<del></del>
22inch diameter stack		9						
on top of recovery tank		10			<u> </u>			
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO OBSERVER	11					·	
25 ft. DISTANCE FROM OBSERVER	DIRECTION FROM OBSERVER	12			<u> </u>			
SER 757/ Em 54 NA	son SW En Same	13						
DESCRIBE EMISSIONS		14					<u>!</u> [	
SIR OOLING	IF WATER DROPLET PLUME	15			<u> </u>			
SIERT WAT SEND SAMPE POINT IN THE PLUME AT WHICH OPACE		16						
SIER ALONE TO DOSTA	TY WAS DETERMINED	17						
DESCRIBE PLUME BACKGROWND/_						1		
SERTRES HILLSIA.		18						
BACKGROUND COLOR	SHOTOMS SAME	19						
WIND SPEED	WIND DIRECTION TO NW	20						
STANCE LENG SAME WIND SPEED SERS - 7 MSh Same AMBIENT TEMP	SIEM WES THE SAMP	21			<u> </u>			
SER 42° F ENO SOME	70%	22		-				
SEEK SOURCE LAY	OUT SKETCH Driew North Arrow	23						
Piume		24						
Sun ++		25				7 .		
<u> </u>	A	26			· .			
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	Observer's Position		J. Tur			-1314		DATE /
14				1/1	_		~	14/20/09
Suntaka	on Line		MEATION opers					
ADDITIONAL INFORMATION		CERT	FIED BY			<del></del>		DATE
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ş		СОМП	NUED O	N VEO F	ORM NU	MBER	/	PIT
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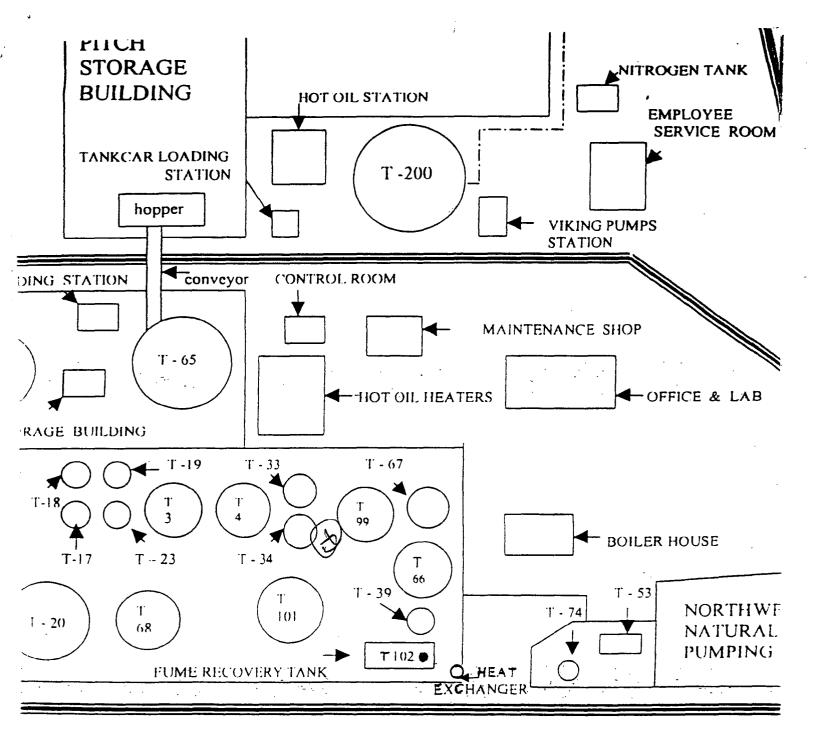


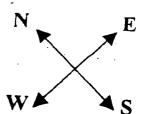
COMPANY NAME				START THE		DO THE		
Formers Inc.		1	5-10	0	5	0	620	0128
7540 N.W. St. Helens	Rd.			15	30	45		COMMENTS
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CITY	STATE ZP	2	J	5	5	5		
Portland	OR 97210	3	10	10	5-	10		
PHONE (KEY CONTACT)	SOURCE ID NUMBER							
503-286-3681		4	3		0	0		
PROCESS EQUIPMENT	OPERATING MODE Operating hours	. \$	0	0	5	10	<u> </u>	
Fume Recovery System	OPERATING MODE	6	5	0	0	_5		· 
CONTROL SOUTHERN		7	<i>P</i>	5	10	10		
DESCRIBE EMISSION POINT		8	3	0	10	70		
221nch diameter stack		-	<del>                                     </del>	10	10			
		9					<del></del>	
on top of recovery tank		10						
. · · · · · · · · · · · · · · · · · · ·	SER End Same	11					•	
DISTANCE FROM ORSERVER	DIRECTION FROM OBSERVER	12		·				
Star 75+1 End SAME		13		<del>                                     </del>				
DESCRIBE EMISSIONS		<u> </u>	1	-		1	·	
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SIER White-End Same		15						
POINT IN THE PLUME AT WHICH OPAGE	TY WAS DETERMINED	16		<u> </u>				
stop of Stack	in sance	17						
DESCRIBE PLUME BACKGROUND		18						
DESCRIBE PLUME BACKGROUND SIENT FOR STATE STATE BACKGROUND COLOR		19	<del> </del>	<del> </del>				
STEN CHECKE SAME	SKY CHOTCHS  SHERCEST SAME	-	-					
WIND SPEED	WIND DIRECTION	20						
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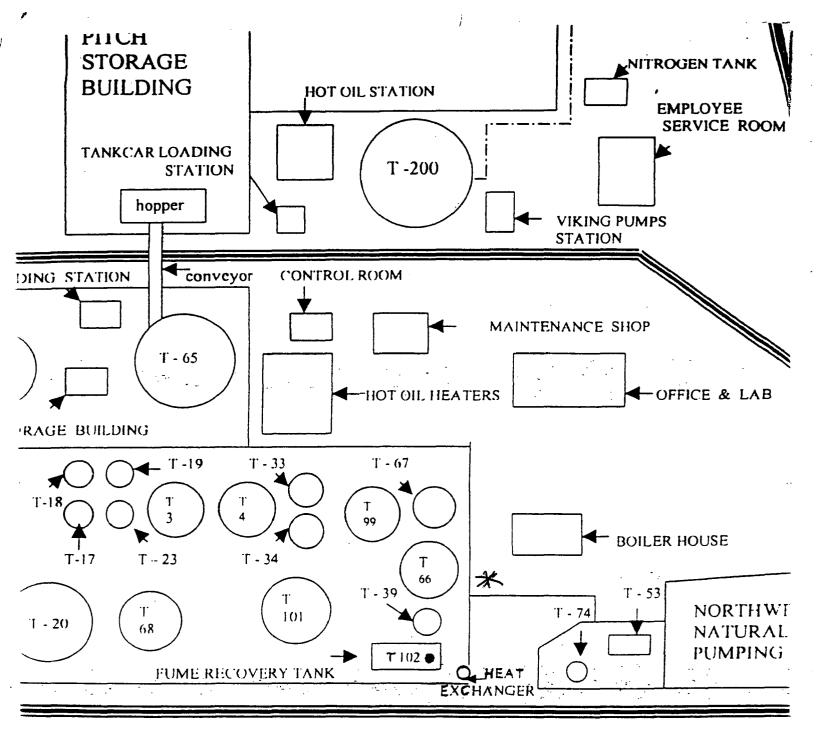


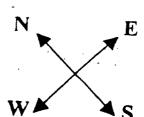
RODGETS Inc.  STORY ADVERSE AND STATE  POPULATE OR STATE  POPULATE OR OR 97210  OR 972	COMPANY NAME		CREENVATION DATE START TIME END TIME						END TIME	
COTY  POTITION  OR  97210  SOURCE POT STATE  OR  97210  SOURCE POWER  SOURCE POWER  PURE RECOVERY SYSTEM  OPERATING MODE  OPERATING MODE  SOURCE BUSING POW  TO SECRET BUSING POWER  2	Koppers Inc.		-   <del>                                   </del>		1	<del></del>	-	10973	11101	
FORT LAND CONTACT  PROVE MEY CONTACT  SOURCE D MANAGE  PROCESS ECUPPMENT  SOURCE D MANAGE  PROCESS ECUPPMENT  OPERATING MODE  FRACESS ECUPPMENT  OPERATING MODE  SOURCE D MANAGE  PROCESS ECUPPMENT  OPERATING MODE  SOURCE D MANAGE  SOURCE COVERY System  OPERATING MODE  SOURCE D MANAGE  SOURCE	7540 N.W. St. Helens	Rd.	-	l °	15	30	-		COMMENTS	
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PRIME RECOVERTY System  Operating hours  Frime Recovery System  Operating Mode  7	503-286-3681	26-2930	_	0	5	0	0		<del></del>	
DESCRIBE DASSION PONT  221nch diameter stack  On too of recovery tank	PROCESS EQUIPMENT		1 7	سح	3	0	0			
DESCRIBE BMSSON PRINT  221nch diameter stack  On top of recovery tank  WEIGHT ABOVE GROUND LEVE.  25 ft.  Say 11ft. Bry Same  10  10  11  12  13  15  16  17  18  18  19  10  10  10  10  10  10  10  10  10		<u> </u>	6	6	0	5	0			
221nch diameter stack  on top of recovery tank  on top of recovery tank  region above ground leve.  Star 1 St. Sar 11ft. She same  25 ft. Sar 11ft. She same  DISTANCE FROM OBSERVER  Sar 1 She Sar 1 She Sar 1 She Sar 1 She Same  DISTANCE FROM OBSERVER  Sar 1 She Sar	CONTROL EQUIPMENT	OPERATING MODE	7	5	5					
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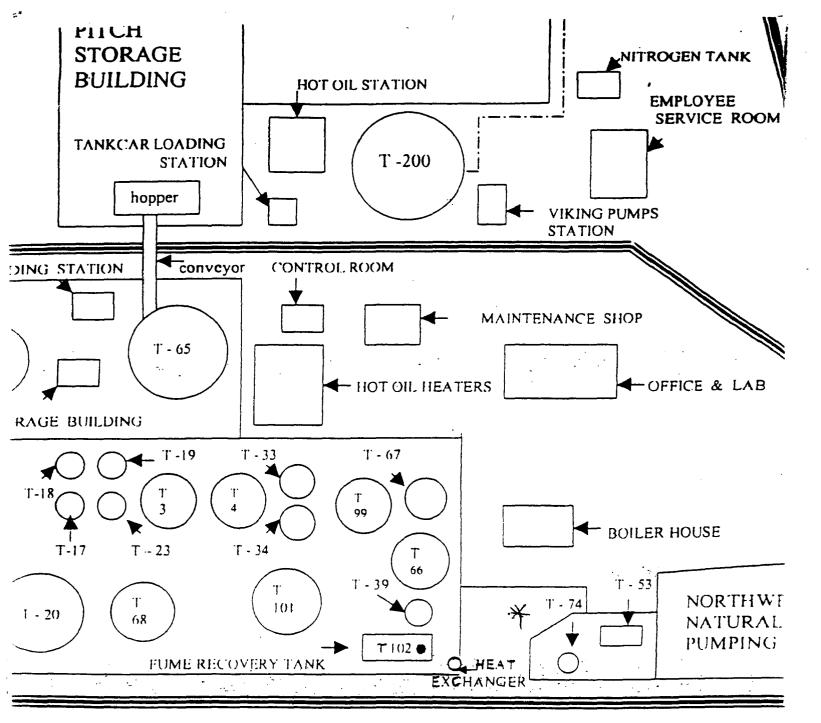
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PROCESS EQUIPMENT OPERATING MODE	5	5	5	10	5				
Fume Recovery System Operating hours CONTROL EQUIPMENT OPERATING MODE	6	10	10	10	5				
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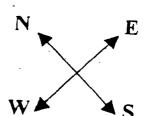




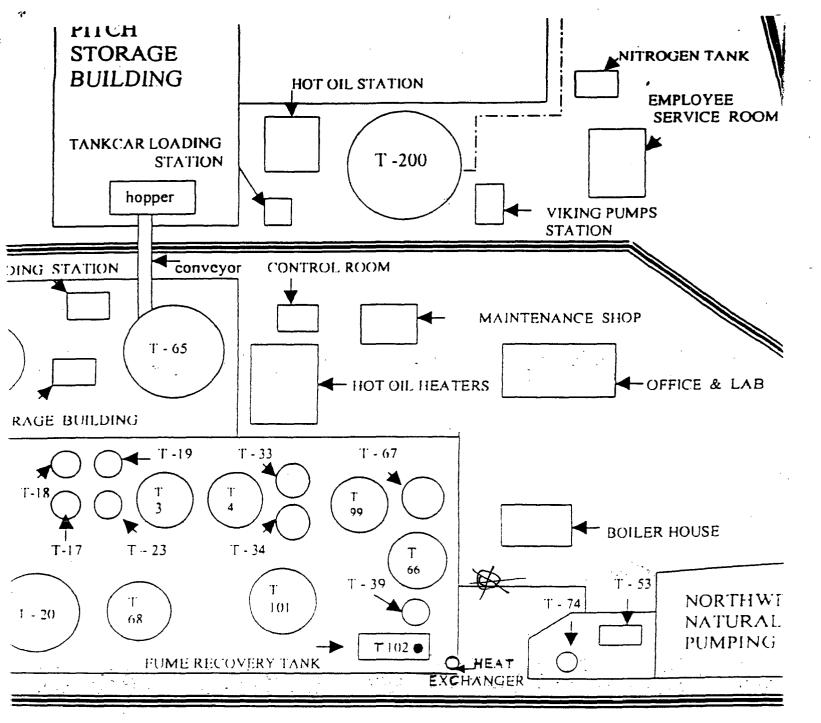
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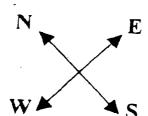
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PHONE (KEY CONTACT) 503-286-3681	26-2930	., 4	5	5	5	10		
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Fume Recovery System	Operating hours	6	5	5	5	3		
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DESCRIBE EMISSION POINT		8						
22inch diameter stack	·	9						
on top of recovery tank		10						
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son GREEN EN SAME	sa Clear in Same	20						
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	Observer's Position	T.J. Turner Cert1517						DATE
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ADDITIONAL INFORMATION		CERTIFIED BY DATE						
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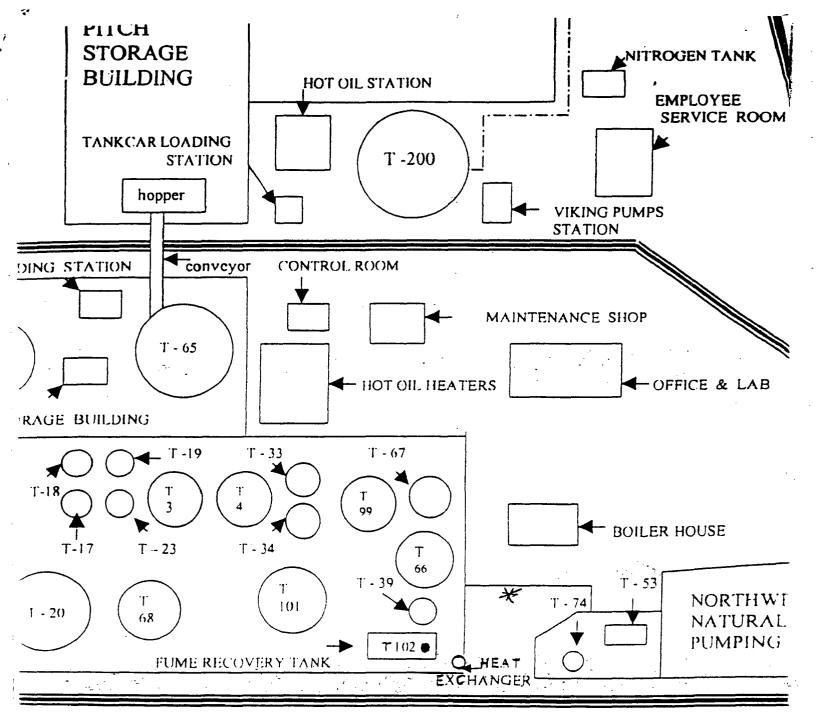


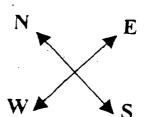
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Koppers Inc.	Koppers Inc.		7-28	7-0	Z	01	443	10647
7540 N.W. St. Helens	Rd.	7	•	15	32	4		COMMENTS
	•	1	5	10	10	10		
COTY	STATE ZP	2	10	10	10	10		
Portland	OR 97210	3	5	5	5	1		
PHONE (KEY CONTACT) 503-286-3681	SOURCE ID NUMBER 26-2930	4	10	5	5	10		
PROCESS EQUIPMENT	OPERATING MODE	. 5	10	10	10	10		
Fume Recovery System	Operating hours	6	15	10	16	10		
CONTROL EQUIPMENT	OPERATING MODE	7	15	15	10	3		<del></del>
DESCRIBE EMISSION POINT		a	<del>/</del>	<del>                                     </del>	10		<u> </u>	
22inch diameter stack		•	<del></del>	<del> </del>				-
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DESCRIBE PLIME BACKGROUND SIMM TREET HILLS IN	in Same	18						
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STEP SAME SAME	SER End	20					• ,	
SERCALM EN SAME	son South En Same	27					····	
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ACDITIONAL INFORMATION		Koppers Inc.						1 DATE
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Koppers Inc.			Cha	MATIO			STAR	TIME	DIC TIME
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CITY	STATE 23P	<b> </b>	2	10	-	15	10	<del> </del>	
PORT LAND	OR 97210	<u> </u>	3 ,	10	10	10	10		
503-286-3681	26-2930		.4	10	10	15	15		
PROCESS EQUIPMENT Fume Recovery System	OPERATING MO	, ,	5	سرز	15	15	10	•	
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DESCRIBE EMISSION POINT 22inch diameter stack			•						
on top of recovery ta	nk		9				i		
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO OBSERV	/ER	10.		·			<del>.</del>	
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	Observer's Position		T.J	Tur	ner (	ert.	-1517		DATE 10-25-0
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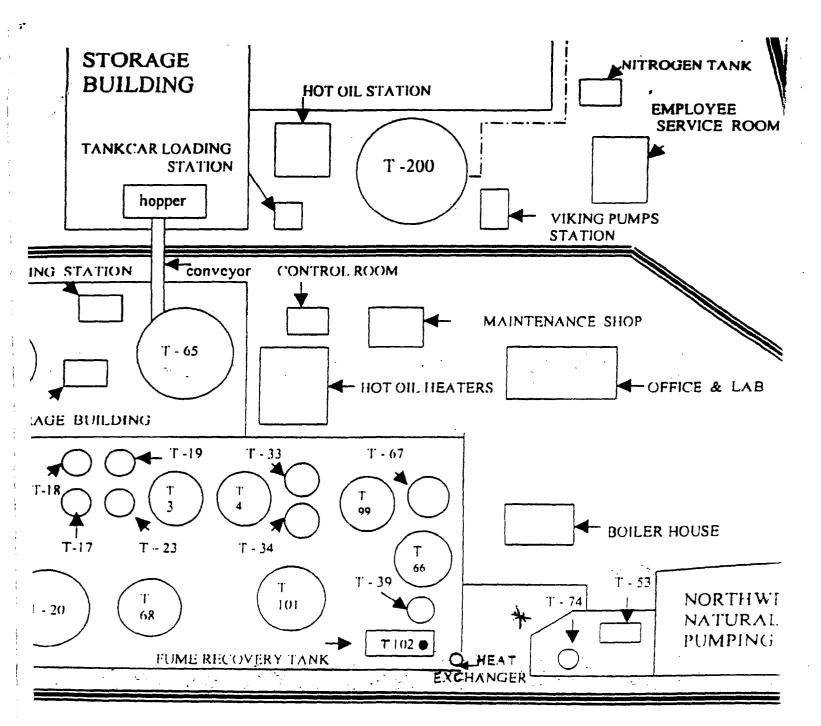
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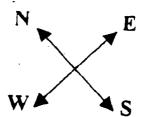
Yakima Clean Air Authority

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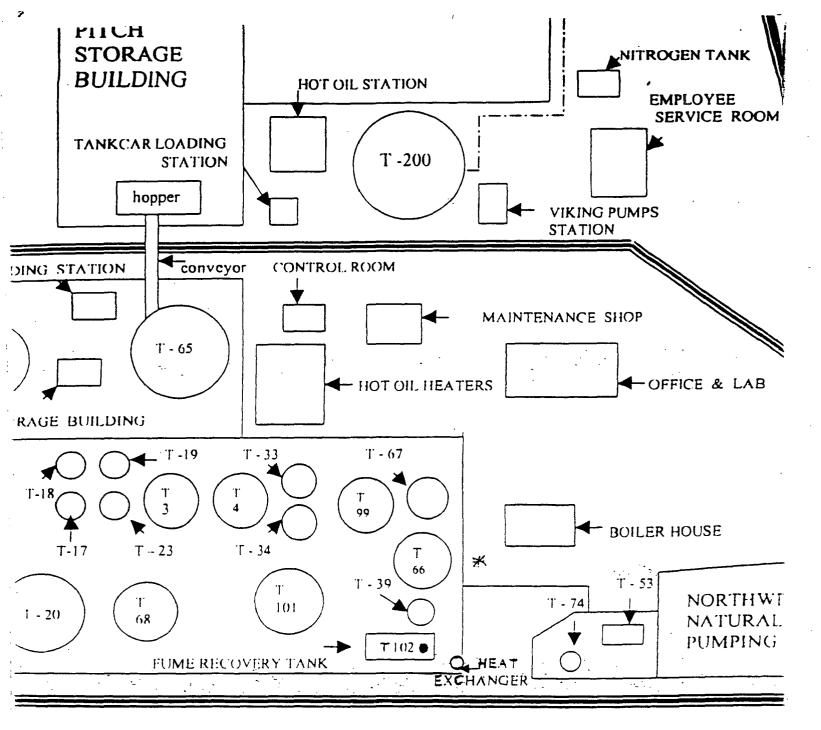
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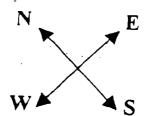
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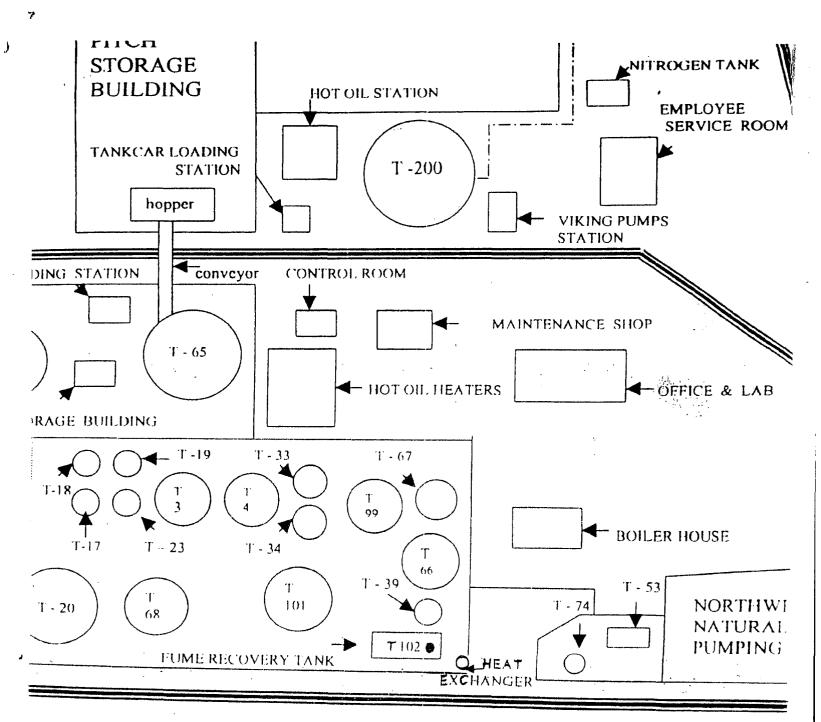


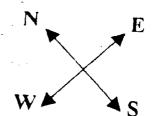
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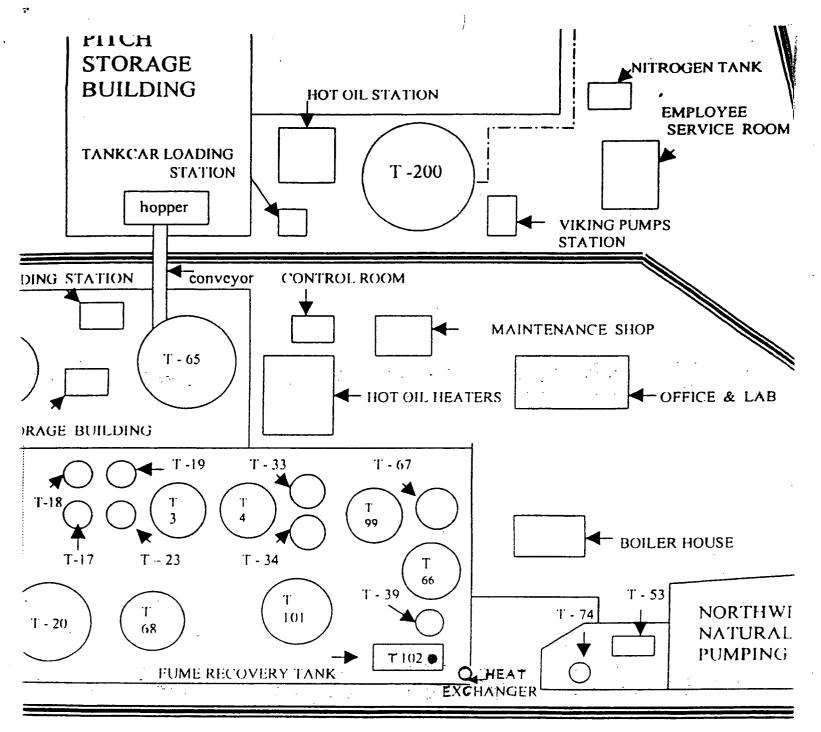


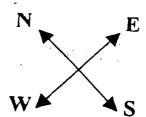
Koppers Inc.		Commo	NATION 1-2	DATE B-L	24	START	300:	0807
STREET ADDRESS 7540 N.W. St. Helens	Rđ.	7	0	15	20	45		COMMENTS
		1	15	15	10	15		
CITY	STATE ZIP	2	15	15	15	10		
PORTLAND PHONE (KEY CONTACT)	OR 97210	3	15	10	10	10	·	
503-286-3681	26-2930	4	15	15	15	15		
PROCESS EQUIPMENT	OPERATING MODE	. 5	15	10	10	15		
Fume Recovery System	Operating hours OPERATING MODE	6	10	10	10	10		
		7	15	10	15	15		
DESCRIBE EMISSION POINT		8						
22inch diameter stack		9						
on top of recovery tank		10		,				<u></u>
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son Top of The Stack!		17						
DESCRIBE PLIME BACKGROUND SING ### SING   KEES	in Same	18						
		79		a.Paraktycznie				
WIND SPEED	STATIONS STATE SAME	80						
STATED ENGSAME		27				ļ		
AMBIENT TEMP SIER 32 F End Septe	WET BULK TEMP RH. DOUBLES	22				ļ		<u> </u>
States SOURCE LAY	OUT SKETCH Drew North Arrow	23						
Plume		24	<u> </u>	<b></b>	7	<u> </u>	•	
Sum +		25				<u> </u>		
1	2	25				<u> </u>		
	Emission Point	27			·	<b>}</b>		
		25						
		23				ļ		
		30			<u> </u>	<u> </u>		
	Observer's Position	OBSE	AVER'S	name (P	RINT) Cert.	-1517		
	- USILION		HVER'S					DATE 1-10-04
14	0		NIZATIO		<u>u</u>	3	er	1-20-09
Sun Loca	tion Line	Ko	ppers	Inc.		-	·	LOATE
ADDITIONAL INFORMATION		Yak	ma Cl	ean 1	Air A	uthor	ity	3-17-04
		сонт	NUED O	N VEO F	ORM NL	MOER		TTTT





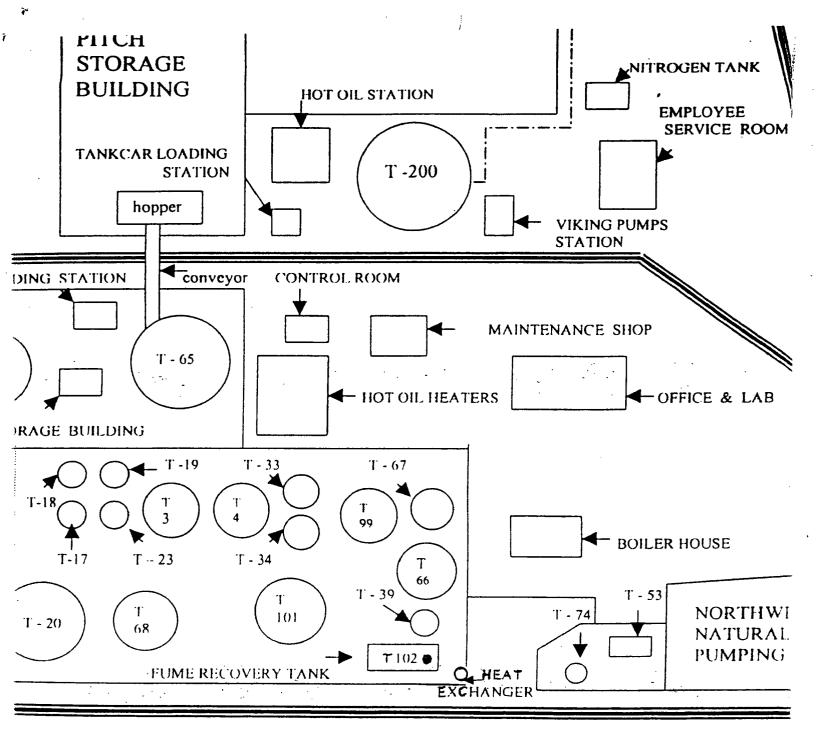
Koppers Inc.		CHSE	AVATION 2-19	DATE 7-09	TIME 745;	0752		
STREET ADDRESS 7540 N.W. St. Helens	Rd.	2000		15	30	45		COMMENTS
		1	10	10	10	10		
CITY	STATE ZIP	2	10	15	15	15		
Portland	OR 97210	3	15	15	15	15		
PHONE (KEY CONTACT) 503-286-3681	26-2930	4	10	10	10	5		
PROCESS EQUIPMENT	OPERATING MODE	5	5	5	10	10		
Fume Recovery System CONTROL EQUIPMENT	Operating hours OPERATING MODE	6	5	5	5	10		
		7	15	15	10	10		
DESCRIBE EMISSION POINT		В		<u> </u>				
22inch diameter stack		6		<u> </u>				
on top of recovery tank	HEIGHT RELATIVE TO OBSERVER	10	<del> </del>	<b></b>		ļ. ————————————————————————————————————		
25 ft.	Sun lift. End same	11	ļ	<del>                                     </del>	ļ	-		
DISTANCE FROM OBSERVER SIZIN 55 FT ENGSUMP	DIRECTION FROM ORSERVER Stan VER Enc Same	12	<del> </del>	<b>_</b>				
DESCRIBE EMISSIONS		13	<del> </del>	<del> </del>				<del></del>
EMISSION COLOR	End SPINE  IF WATER DROPLET PLUME	14	<del> </del>	├				
Som white and same	Attached  Detached  Detach	15	<del> </del>	<del> </del>	<del> </del>	<del> </del>		
POINT IN THE PLUME AT WHICH OPAGE SINT OF OF STOCK I F	Teno Some	17	-	├─-	-	}	1	
DESCRIBE PLUME BACKGROUND		18	<del> </del>	<del>                                     </del>		-	1	
smilalling	En Legen B	19	<del> </del>	<del> </del> -			<u> </u>	
BACKGROUND COLOR STER SCOUNTERS	SIGN CONDITIONS Stan Coul V End	20				<del> </del>	[	
SIENCALM ENGSONNE	WIND DIRECTION	21	<del>                                     </del>	<del>                                     </del>				
AMBIENT TEMP	WET BULB TEMP PIN DECENT	22	<del>                                     </del>			<del> </del>		
SIAN 40 F ENDSame	68%	23	<del> </del>	<del> </del>		<del> </del>		
with C	YOUT SKETCH DIEW NORTH ARTOW	24		<del>                                     </del>	1			
Plume Sum		25						
Wind		26		<del>                                     </del>				
	Emission Point	27		<del> </del>		<del>                                     </del>		
		28			<u> </u>	<b>†</b>		
		28				†		
		30						·
		1	RVER'S			<del></del>		
	Observer s Position	-	J. Tu			-1517		DATE
"	10	2	2 6 1	12	er		٤	2-19-09
Sun Loca	tron Line		MOZATION ppers					
ADDITIONAL INFORMATION		CERM	PIED BY		in h		· +	DATE
		ļ	ادر خالید و بادران در به خالید و بادران			uthor:	r r y	3-17-04
		CONT	NUED O	N VEO F	ORM NU	MBEH		

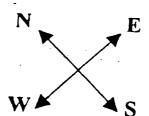




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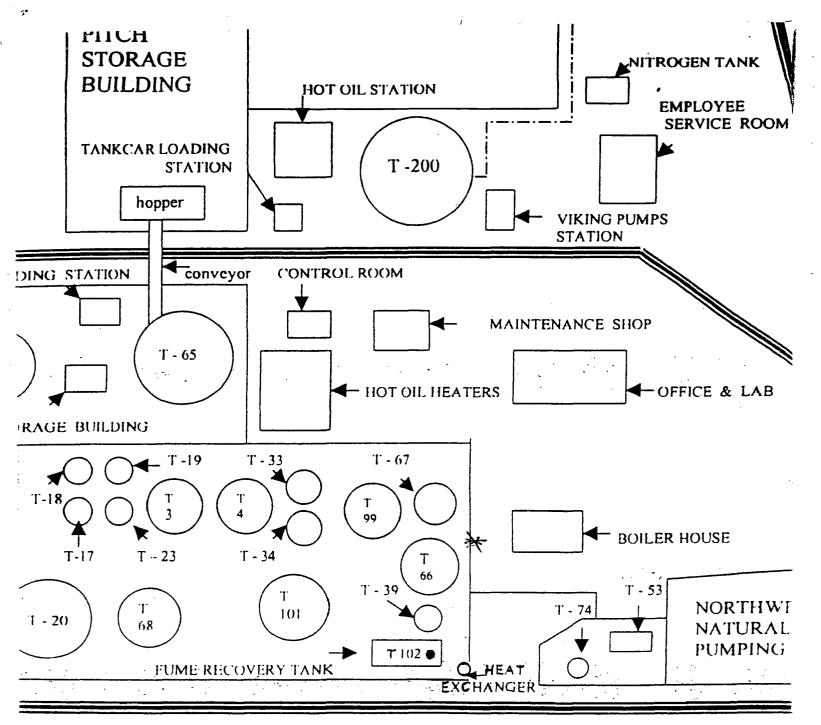
COMPANY NAME			OBSERVATION DATE START TIME END TIME  3-18-04 0700: 0708							0
Koppers Inc.			SEC	7-18	10	<del>/</del>		1/64.5	070	8
STREET ADDRESS 7540 N.W. St. Helens	Rd.		1	0	15	30	45		COMMENTS	
		•	1	5	5	10	10			
CITY	STATE OR	<b>ZIP</b> 97210	2	3	5	5	5		10	
PHONE (KEY CONTACT)	SOURCE ID NUMBE		3	5	5	5	3			
503-286-3681	26-2930		4	5	5	5	5			
PROCESS EQUIPMENT		ATING MODE	· 5	10	5	5	10			
Fume Recovery System		ATING MODE	6	10	10	5	5			
	· · · · · · · · · · · · · · · · · · ·		7	5	5	10	10			
DESCRIBE EMISSION POINT			В	10	<u> </u>	5	5			
22inch diameter stack			9							
on top of recovery tank	MERCHT BECATIVE T	O ORESDVER :	10	ļ		· .				
1 25 ft.	Smr llft.	End same	-11 /							
DISTANCE FROM DESERVER	DIRECTION FROM O	DESERVER	12	<u> </u>			ļ		<u> </u>	
			13				<u> </u>		-	
sun stling	En Same		14	<u> </u>						
EMISSION COLOR	IF WATER DROPLET		15		ļ					
SINT White SINE AT WHICH OPACE	TY WAS DETERMINED	)	16		<u> </u>					
sunjain above Stack	En Game		17							
DESCRIBE PLUME BACKGROUND, SIENT TREES HIS IN	Enc Sound		18			ļ				
BACKGROUND COLOR	SKY SONDITIONS		19							
STEIN BRUKEN SAME	WIND DIRECTION		20		<u> </u>					
SERCAIN EN SAME		End Same	21	<u> </u>	<u> </u>		<u> </u>			
SIER 50 F End 5/F	WET BULB TEMP	66 %	22			<u> </u>	ļ <u>-</u> -			
	OUT SKETCH	Draw North Arrow	23			<u> </u>				
with CEP			24			<u> </u>				
Sun +		70	25					<u> </u>		
			25		<u> </u>		<u> </u>			
(2)	Emission Point		27				<u> </u>			
			28		<u> </u>					
/			29							<b></b>
			30				<u> </u>			
				RVER'S			-1517	-		
	Observer's Position			AVER'S					3-18	1011
14			0864	NIZATION					3-18	-07
Sun Local	in the	->	Kø	ppers	Inc.					
ADDITIONAL INFORMATION			Yaki	FIED BY Lma Cl	lean i	Air A	uthor	ity	3-17-0	14
			CONT	NUED O	N VEO I	FORM NI	JMBER			
			<u></u>							

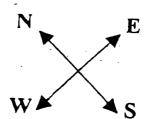




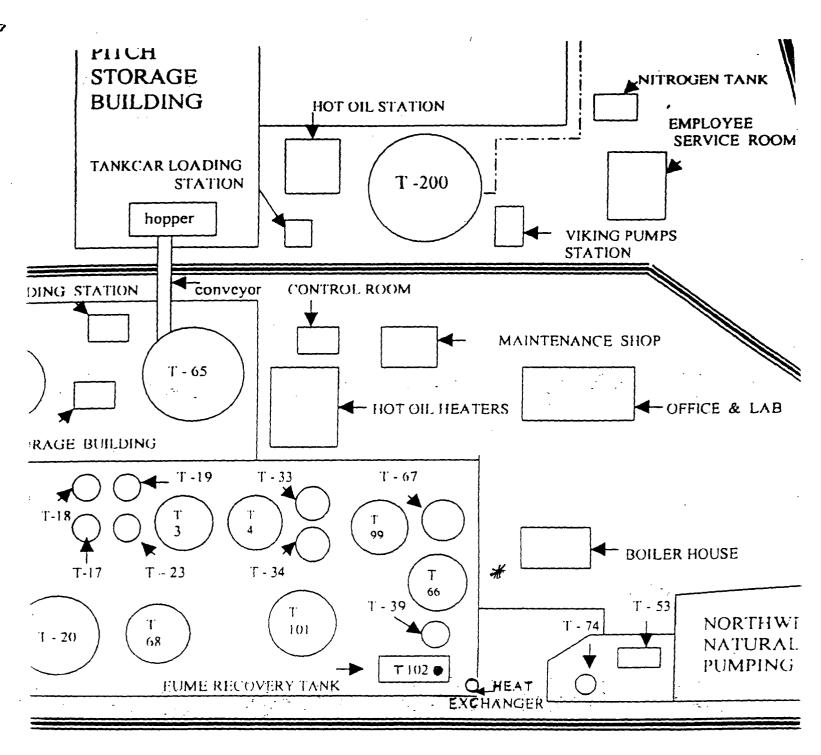
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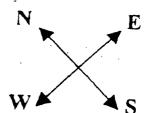
COMPANY NAME		OBSE	RVATION			START		END TIME
Koppers Inc.			4-2	7-	04	0	650	0658
7540 N.W. St. Helens	s. Rd.	SEC	0	15	30	45		COMMENTS
		1	5	5	10	5		
CITY	STATE ZIP	2	5	5	5	5		
Portland	OR 97210	3	3	10	10	10		
PHONE (KEY CONTACT) 503-286-3681	SOURCE ID NUMBER 26-2930	4	5	10	5	5		
PROCESS EQUIPMENT	OPERATING MODE	- 5	0	0	0	5		
Fume Recovery System		6	1	100	5	5	<del> </del>	
CONTROL EQUIPMENT	OPERATING MODE	7	0	0	0	5		
DESCRIBE EMISSION POINT		8	5	5	5	0		
22înch diameter stack		9						
on top of recovery tan	k	10						
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO OBSERVER SEE 11ft. End Same	1,1						
25 ft. DISTANCE FROM OBSERVER	DIRECTION FROM OBSERVER	12				•		
	Son SW. En SNAL	13						
DESCRIBE EMISSIONS Start FOOD NOT	Em Game	14						
EMISSION COLUR /	IF WATER DROPLET PLUME	15						
STERN White End Same POINT IN THE PLUME AT WHICH OPA	P Attached C Detached C CITY WAS DETERMINED	16						
surface of Stack exha	and same	17						<del></del>
DESCRIBE PLUME BACKGROUND		18						
SIERT TREES	End Sa M. C.	19						
SIM GREEN END SANGE	SKY PROTIONS   SEET CHANGE SAMP	20				<del> </del>		
WIND SPEED 5 mph	WIND DIRECTION  SINGE SEE STATE	21					<del> </del>	
AMBIENT TEMP	SER ESE ENGLANCE WET BULS TEMP RH. DOPTORTE  SER	22				<u> </u>		
Start 3/ 1 End Jarray	33/6	23		<del>                                     </del>			-	· · · · · · · · · · · · · · · · · · ·
with	AYOUT SKETCH Draw North Arrow	24		†		1.		·
Sun +		25		<del>                                     </del>		1		
Wind —		26	<del>                                     </del>		<del>                                     </del>	1		
	Emusion Point	27	<del>                                     </del>		1	1		
		25				1		
		29			1	1	1	
		30						
			AVER'S					
	Observer's Position					-15T	7	
		0	RVER'S	SIGN	2			DATE 27-04
	140"		WEXTO					
7/5	CHILDN Line		ppers		·			! DATE
ADDITIONAL INFORMATION		Yak:	ima C	lean	Air A	uthor	ity	9-17-04
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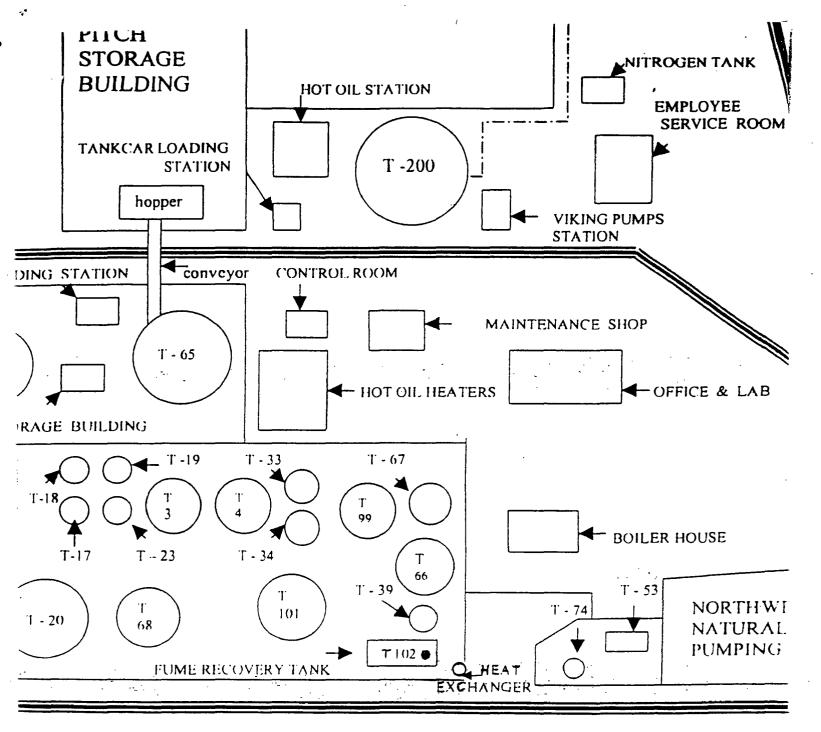


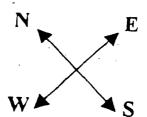
,									
COMPANY NAME		OBS	ERVATION	DATE	- 11	START	TIME	END TIME	
Koppers Inc.		<u>نـا لـــ</u>	<u> </u>	0-1	27	0	L 3.CR	OL3	
STREET ADDRESS 7540 N.W. St. Helens	Rd.	LAST		15	300	45		COMMENTS	
		1	5	5	5	7-			
CITY	STATE ZIP		5	5	10	10			
Portland	OR 97210	3	10	10	10	15			
PHONE (KEY CONTACT) 503-286-3681	26-2930	4	10	10	10	10			
PROCESS EQUIPMENT	OPERATING MODE	5	15	15	10	15			
Fume Recovery System		irs 6	10	1	1	5			
CONTROL EQUIPMENT	OPERATING MODE	7	5	10	J-	5		<del></del>	
DESCRIBE EMISSION POINT		=  -	1	10	2-	-	<u> </u>	<del></del>	
22inch diameter stack			<del> </del>	╂	<del></del>	<del> </del>	<del> </del>		
		<u>                                  </u>		<b>├</b> ─-		ļ	-		
on top of recovery tank	. HEIGHT REVATIVE TO ORSERVER		<u> </u>		ļ	<u> </u>			
25 ft. DISTANCE FROM OBSERVER	Sun llft. End same	117		1	3 3 3				
DISTANCE FROM OBSERVER	DIRECTION FROM OBSERVER	12		<u> </u>	_ :				
STER 75 ft Eno Same	SON W S W End Same	13		Ī .		-			
DESCRIBE EMISSIONS	Fro Same	14	1	1					
DESCRIBE EMISSIONS  STERT LOT TO THE PLUME AT WHICH OPAGE  POINT IN THE PLUME AT WHICH OPAGE	IF WATER DROPLET PLUME	15							
SHET IN THE BUILDE AT WHICH CHACE	Attached C Detache	16					<del>                                     </del>	<del> </del>	
sen Top of Stack	Ero Samp	17	1				<del>                                     </del>	<del></del>	
Table of the state		18	<del>1</del>	1-		<del> </del>			
SIRT TICES HIMS INST	to Same	19	+	-	<del> </del> -	-	<del> </del> -	<del></del>	
STATE CORNER SOME	State CLAP A End Gain		-	}		<del> </del>	<del> </del>	<del></del>	
WIND SPEED	WIND DIRECTION	21	<del> </del>	┼		<del> </del>			
SanCalm Eng Same	Start West End Sant		<del></del>	<del> </del>		<del> </del>	ļ		
SIER GRN. END SOME WIND SPEED, SIER CAIM END SAME AMBIENT TEMP SIER 55 F END SAME	WE! SULE TEMP RH. percent	5 22	<del> </del>			ļ.,			
States SOURCE LAY		4	<u> </u>						
with Plume		24							
Sun -		25						·	
Wind		26							
	Emission Point	27	1						
		28						· · · · · · · · · · · · · · · · · · ·	
	•	29		1					
,		30	†		<u> </u>	<del>                                     </del>	<del> </del>		
		OPS	ERVER'S	NAME /B	PINTO	<u> </u>	<del></del>		
	Observer's Position		J. Tu			-1517	7		
	<b>&gt;</b>	<del></del>	ENVER'S					DATE 5-20	NU
14		ORG	ANIZATIO	N N				5.20	.07
Sun Lag	on Line		ppers						
ADDITIONAL INFORMATION		Yak	ima C	lean .	Air A	uthor	ity	9-17-	04
		CON	TINUED (	W VEO	ORM NI	MBER			
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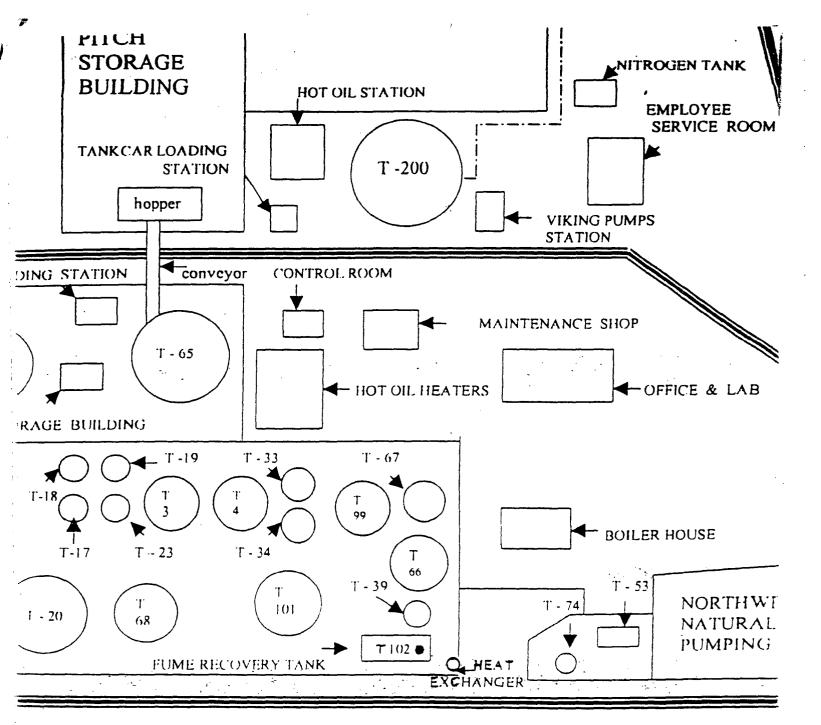


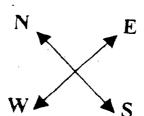
COMPANY NAME Koppers Inc.	٦	CESERVATION DATE START TIME  L-22-04 0645						OLS!		
STREET ADDRESS 7540 N.W. St. Helens Rd.	- 11	SEC	0	15	30	45		COMMENTS		
		1	5	5	5	0				
CITY STATE ZIP		2	0	5	5	2				
Portland OR 9721		3	~	1	I	5				
PHONE (KEY CONTACT)   SOURCE ID NUMBER   503-286-3681   26-2930		4	0	0	0	5-				
PROCESS EQUIPMENT OPERATING MO	; ;	5	7-	5	5.	Ser-				
Fume Recovery System Operating CONTROL EQUIPMENT OPERATING MO		6	3	3	5	5				
CONTROL EQUIPMENT		7								
DESCRIBE EMISSION POINT		8								
22inch diameter stack		9								
on top of recovery tank.	11	10	-		·		s			
HEIGHT ABOVE GROUND LEVEL HEIGHT RELATIVE TO DESER 25 ft. Start 11ft. End Salt	ver ne	11								
DISTANCE FROM OBSERVER   DIRECTION FROM OBSERVER		12	,	•						
SER 7011 End SAME SER DEW End 9		13				·				
DESCRIBE EMISSIONS SIER LOOP SERVE S		14								
EMISSION COLOR IF WATER DROPLET PLUME		15								
SIER WILL END SA PLANTED ADMINED DE SERMINED	stached _	16								
sun IFT aboute Stack End Some		17								
DESCRIBE PLIME BACKGROUND, SIENT TREES HITTSINGER Same		18								
BACKGROUND COLOR SKY CONDITIONS	11	19							-	
STER GRAVE ENG SAME STEET CHECK ENG SON	me	20						<u> </u>		
Start 5 Mph End Same Start WNW End		21								
AMBIENT TEMP RH. DE STEET STEE	16 L	22								
	OCTO ACTOR	23								
with Plume		24				ļ		<del>_</del>		
Sun +	<i>&gt;</i>	25	-	<u> </u>		ļ				
		25								
Emission Point		27								
		28				<u> </u>			· · · · · · · · · · · · · · · · · · ·	
		23								
	. ] L	30			<u> </u>	ļ	<u> </u>			
2			VER'S			-1517	,			
Observer's Pasition		T.J. Turner Cert1517  OBSERVERS SIGNATURE  DATE  DATE							-04	
1400		DRGAN		<u>, , , , , , , , , , , , , , , , , , , </u>		5-2	er_	10-00	VT	
Sun Labellan Line		Kop	pers	Inc.					·	
ADDITIONAL INFORMATION .	Y	enn Zaki	ma Cl	ean <i>l</i>	Air A	uthor	ity	17	04	
	[c	CONTI	NUED O	N VEO F	ORM N	MBER				



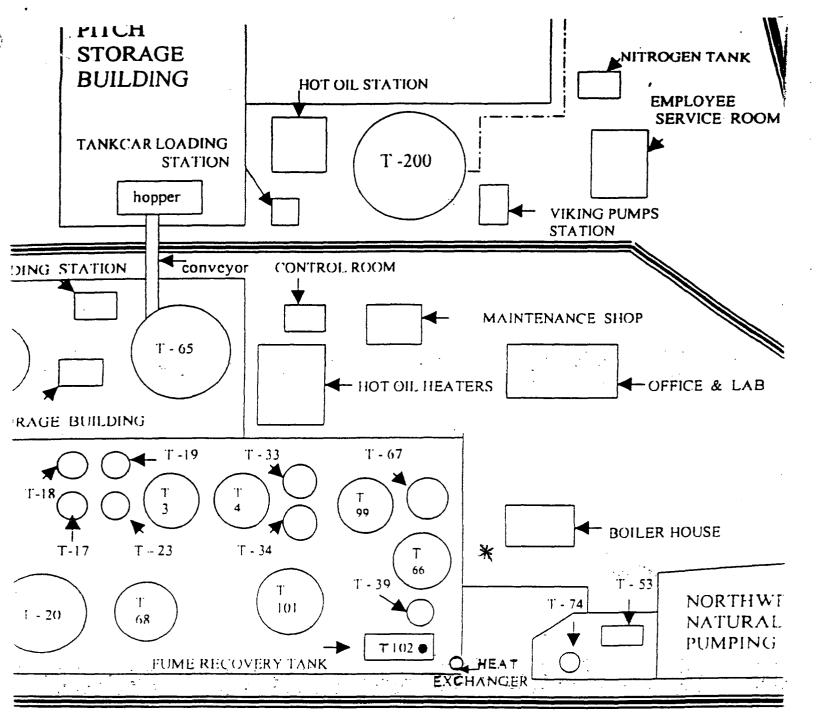


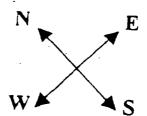
COMPANY NAME			OBSERVATION DATE START TIME END TIME						
Koppers Inc.				7-2	17-0	<u>99</u>	DE	5 lis_	0638
STREET ADORESS 7540 N.W. St. Helens	Rd.		SEC	0	15	30	45		COMMENTS
			1	0	0	0	6		
CITY	} <sup>-</sup>	ZIP	2	0	0	5	5		
Portland	OR SOURCE ID NUMBER	97210	3	0	0	0	5	1	
PHONE IKEY CONTACT) 503-286-3681	26-2930		4	3	3	سيح	5		
PROCESS EQUIPMENT	OPERA*	TING MODE	· 5	سو	~	0	0		
Fume Recovery System	Opera	ating hours	6			1	- T		
CONTROL EQUIPMENT	OPERA*	TING MODE	7	5	5	2_	2		
DESCRIBE EMISSION POINT			8						
22inch diameter stack		1	ļ						<del></del>
ZZII.C.I. GZGMOBOJ			9		ļ		<u> </u>		
on top of recovery tank	. usique de: : take te	ORCEDICE	10				·		
25 ft.	sun lift.	nd same	. 11			100	-	-	
25 ft. DISTANCE FROM OBSERVER	DIRECTION FROM DE	ISERVER	12						
san 80 and Same	Sun Wes/ E	re same	13				·	_	
DESCRIBE EMISSIONS	- Samo		14						**
DESCRIBE EMISSIONS SIEM LOS FOLOR EMISSION COLOR	IF WATER DROPLET	PLUME	15						
SIER WILL END SAME POINT IN THE PLUME AT WHICH OPACE	Attached C	Detached C	16						
sun Top of STack	En Same		17						
DESCRIBE PLUME BACKGROUND			18					<u> </u>	
SIER HITSIDEN TPERS	Enc 99MM		19						
Som CARRONER Same	Som Change E	same	20						
STEED STEED	Stan South	no same	21						
AMBIENT TEMP	WET BULS TEMP	RH. percent	22						
		35/0	23						
Stack SOURCE LAY	OUT SKETCH	Draw North Arrow	24						
Sun +	<b>&gt;</b>		25	·			<del>                                     </del>	İ	
Wind -			26						
	Emission Point	,	27						
			28						
			29						
			30						
			ORSE	TVER'S	VAME (P	PINT	<u></u>		
	Observer's Position	· ·		J. Tu			-1517		
	7		OBSERVERS SIGNATURE OF					7-2004	
14		_		NZATIO		1			1 0001
Self Local	ion Line			pers				···	LDATE
ADDITIONAL INFORMATION				ma Cl		Air A	uthor	ity	9-17-04
			CONT	NUED O	N VEO F	OFIM NU	MBER		
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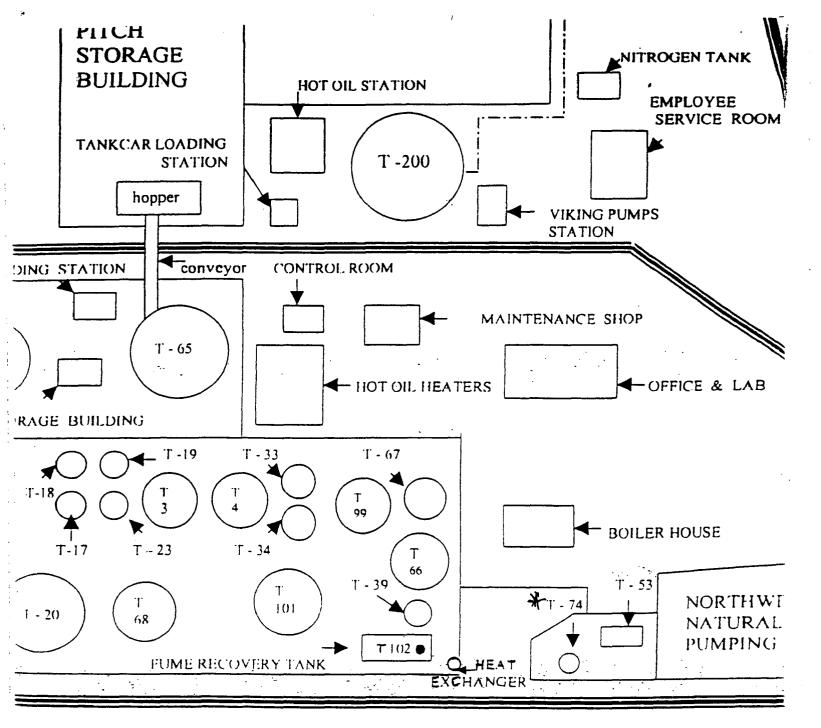


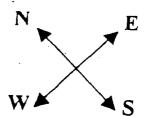
COMPANY NAME								END TIME	
Konners Inc.			3.2.	1.0	4	0	6 SIR	1063	_
STREET ADDRESS 7540 N.W. St. Helens	Rđ.	1885	0	15	30	45		COMMENTS	
		1	0	0	0	0			
CITY	STATE ZIP	2	0	0	0	5			
Portland	OR 97210	3	3	5	0	0		-	
PHONE (KEY CONTACT) 503-286-3681	26-2930	4	0	7	5	0			
PROCESS EQUIPMENT	OPERATING MODE	· 5	0	5	5	5		_	
Fume Recovery System	Operating hours OPERATING MODE	6	5	10	10	10			
CONTROL EQUIPMENT	OFERATING MODE	7	5	10	5	5			
DESCRIBE EMISSION POINT		8							
22inch diameter stack		9							
on top of recovery tank	· · · · · · · · · · · · · · · · · · ·	10							
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO DESERVER	1,1		} :				•	
25 ft. DISTANCE FROM OBSERVER	DIRECTION FROM OBSERVER	12					·		
	Star S W. End Same	13						<del></del>	
DESCRIBE EMISSIONS	- Cano	14			<u> </u>			<u></u>	
DESCRIBE EMISSIONS STEIN DOUBLE   NO.	IF WATER DROPLET PLUME	15							
STERN THE BUINE AT WHICH OPACE	Attached C Detached C	16					<u> </u>		
sm/2 above Stack	end Same	17							
DESCRIBE BLUME BACKGROUND		18							
SIENT LESS HITTS IN	SCY CONDITIONS	19				<del>  -</del>			
STERN CROCING COLOR STERN CROCING END SAME WIND SPEED STERN CAN END SAME AMBIENT TEMP STERN COFFERD SAME	San Clean En Same	20					<u> </u>		
WIND SPEED	WIND DIRECTION	21				<del>                                     </del>	<b></b>	<del></del>	
AMBIENT TEMP	WET BULB TEMP RH. percent	22	<del> </del>				1		
Start LOF End Same	380	23					· · · · · ·	<del>- ·</del>	
with	OUT SKETCH Draw North Arrow	24		<del>                                     </del>		<u> </u>			
Pturne Sun —		25	-	<del> </del>		<del>  -</del>	<del>                                     </del>	<u></u>	
Wind -		26		-	-		<del> </del>	<u> </u>	
	DEMISSION FOIN:	27		<del> </del> -	<u> </u>		<del> </del>		
· · · · · · · · · · · · · · · · · · ·	Emparem Poin;	-			-				
4		28		}	<del> </del>	ļ			
		29			-	ļ <u>.</u>	<u> </u>	<del></del>	<del></del>
	·	30	<u></u>	<u></u>	<u> </u>	<u> </u>	<u> </u>		
	Observer e De		AVER'S T. Tu			-15 <u>1</u> ,7			
	Observer's Position		RVER'S					DATE	
14	o-	CEGA	NEATIO		2/2	z z	T	8-24	· <i>-D4</i>
Sungaria	tion Line	L	ppers						
ADDITIONAL INFORMATION		Yaki	FIED BY	ean i	Air A	uthor	ity	9-/7	.04
	·				ORM NL				
				, , , ,					



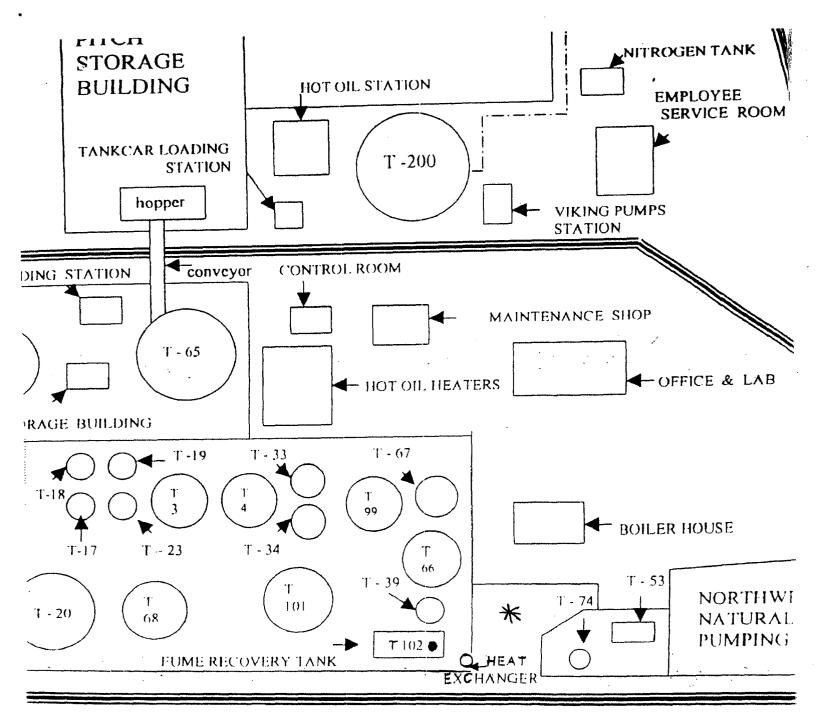


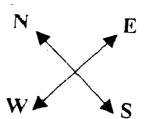
			-			START	TIME	: 624	TIME	
COMPANY NAME	ì	OBSE	9-2	3-1	74		40.5		64	
Koppers Inc.  STREET ADDRESS 7540 N.W. St. Helens	Rđ.	SEC	0	15	30	45		COMM		
		1	0		5	5	<del>                                     </del>			
	STATE ZIP	2	1/2	5	7	7				·
Portland	OR 97210	3	10	10	7	10				··
PHONE (KEY CONTACT)	SOURCE ID NUMBER 26-2930	4	10	10	5	10	<del> </del>			
503-286-3681			10	10	3	2	<del></del>			
PROCESS EQUIPMENT Fume Recovery System	OPERATING MODE Operating hours	· 5	0	0	3	0				
CONTROL EQUIPMENT	OPERATING MODE	6	5	0	0	0				
		7	5	10						
DESCRIBE EMISSION POINT		8								
22inch diameter stack		9								
on top of recovery tank		10								
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO OBSERVER	11			2 , .		-	1,74	•	
25 ft. DISTANCE FROM OBSERVER	DIRECTION, FROM OBSERVER	12		<del>                                     </del>		-	<del>                                     </del>	<del></del>		
son COFF ENSAME	SER WEST EN Same	13	}	-		-	1			
DESCRIBE EMISSIONS .		14				<del> </del>	<del>                                     </del>	·		
son Lotting	IF WATER DROPLET PLUME	-		-					-	
SIMO White End Came	Attached I Detached I	15				ļ	<del> </del>			
POINT IN THE PLUME AT WHICH OPACE	TY WAS DETERMINED	16	-				<u></u>			
320 7-001	en Sane	17		<u> </u>						
DESCRIBE PLINE BACKGROUND	en Conver	18								
SIER HILLSING - TRUE BACKGROUND COLOR	SKY CONDITIONS /	19								_
So Greento Same	SMINC/OUDY END SAME	- 20								
SIEUT CAUM End	- 177	21								
AMRIENT TEMP	WET BURS TEMP BY THE	22								
SIER 53°F ENGAME	12/18	23			-		<del>                                     </del>	· · ·		
Stack SOURCE LAY	OUT SKETCH Draw North Arrow	24	<del>                                     </del>	-	<del> </del>					
Plume		-	-		<u> </u>	<u> </u>	-			
Sun +		25	<del> </del>			<u> </u>			· · ·	
		26					1			
(X	Emission Point	27							<u> </u>	
		28								
		29								
		30								••••
		OBSE	RVER'S	NAME (P!	RINT)	<u> </u>	<del></del>			
	Observer s Position	T.,	J. Tu	rner (	Cert.	-1517				
		OBSE	RVER'S	SIGNATIO				DATE	23-	104
140		ORGA	NIZATIO					: /	<u> </u>	//
Sun Locke	Line	Ko	ppers	Inc.						
ADDITIONAL INFORMATION		Yaki	FIED BY Lma Cl	ean F	Air A	uthor	ity	DATE	17-6	25
· ·		=						<del></del>		T 7
		CONT	NUED O	N VED F	ORM NI	MBER				
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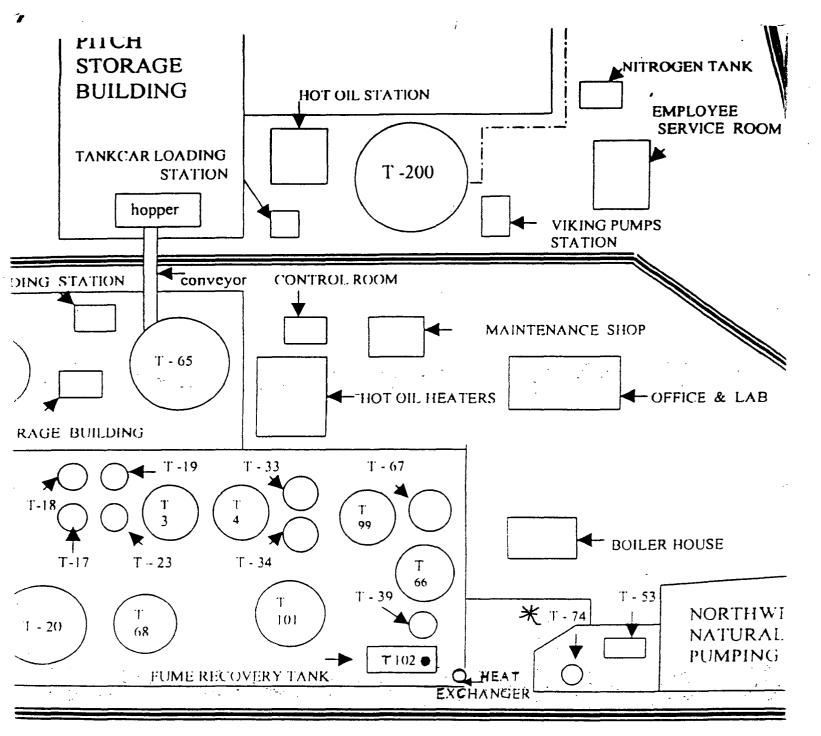


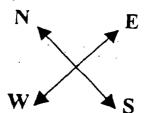
COMPANY NAME		OBSERVATION DATE START TIME					TIME	END T	ME
Koppers Inc.		1	7.2	1.0	4	0	640	06	48
STREET ADDRESS 7540 N.W. St. Helens	Rd.	35EC	0	15	30	45		COMMEA	πs
		1	10	10	10	10			
CITY	STATE ZIP	2	10	15	15	15	1		
Portland	OR 97210	3	10	10	15	10			
PHONE (KEY CONTACT) 503-286-3681	SOURCE ID NUMBER 26-2930	4	10	10	10	10			
PROCESS EQUIPMENT	OPERATING MODE	5	10	16	10	10			
Fume Recovery System	Operating hours  OPERATING MODE	6	15	15	10	10			
CONTROL EQUIPMENT	OF DATE MODE	7	10	10	15	10			
DESCRIBE EMISSION POINT		8							· · · · · · · · · · · · · · · · · · ·
22inch diameter stack		9					,		
on top of recovery tank		10		,					
HEIGHT ABOVE GROUND LEVEL 25 ft.	HEIGHT RELATIVE TO OBSERVER State  End Same	1,1				• •			
	DIRECTION FROM OBSERVER	12	<del>                                     </del>	-					
SER 70 FT END SANG	SON WEST EN SAME	13					<del>                                     </del>		<del></del>
DESCRIBE EMISSIONS		14							
STER OF ONE	IF WATER DROPLET PLUME	15	<del>                                     </del>						
SIEM WHILE ENGLANDE POINT IN THE PLUME AT WHICH OPAGE		16					<del> </del>		<u> </u>
SIED TOP OF STACK IF	END Some of	17	-		-	-	<del>}</del>		<del></del>
DESCRIBE PLUME BACKGROUND	,	18				<del> </del>			<del> </del>
Sun Trees Hillowife	in Same	19	ļ				}	<del></del>	···
BACKGROUND COLOR CREN BEN EN SAME	SUP PLAST END SAME		-			<del> </del> -	<del> </del>	<del></del>	
WIND SPEED	WIND DIRECTION	20		<b> </b>					
SIBIR End	Start Cal M End Same WET BULB TEMP RH. percent	21	!				<u> </u>		
Start 54 of Entance	78/4	22	<u> </u>	<b>.</b>				<del> :</del> -	
SINCK SOURCE LAY	OUT SKETCH Draw North Arrow	23			<u> </u>				
Pitume		24					ļ <u></u>	<del></del>	· · · · · · · · · · · · · · · · · · ·
Sun +		25							
	5	26		<u> </u>					
·	Emesion Point	27							
		25							
	· · · · · · · · · · · · · · · · · · ·	29							
		30							
	•		RVER'S						
أر	Observer s Position	<u> </u>	J. Tu	_	_	-1517	<u> </u>	<del></del>	
			AVER S	SIGNATO .			-	DATE	21.04
			<b>MEATIO</b>						
Sun your	tion Line	محك	ppers		**			DATE	
ADDITIONAL INFORMATION	•.	Yak	ma Cl	ean A	Air A	uthor	ity	14-17	7-05
		сомт	NUED O	N VEO F	ORM NL	MBER			
									<del></del> _





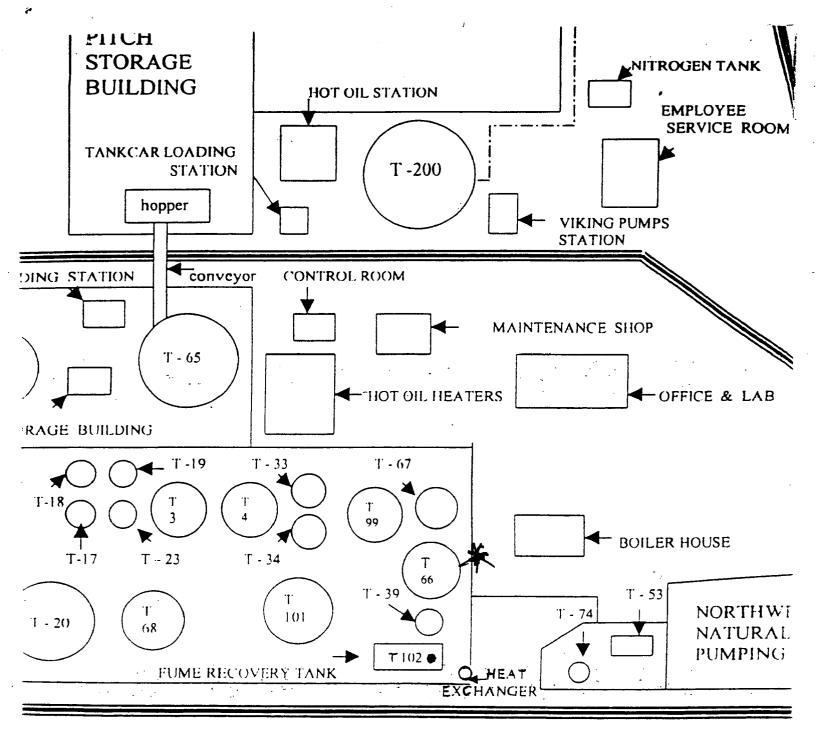
COMPANY NAME		OBSERVATION DATE START TIME END						END TIME
Koppers Inc.				2.0	r 4		OGS:	0708
STREET ADDRESS 7540 N.W. St. Helens	Rd.	- SEE	0	15	30	45		COMMENTS
	•	1	10	10	10	10		
	STATE ZP	2	10	10	10	10		
Portland	OR 97210	3	10	10	10	15		
PHONE (KEY CONTACT) 503-286-3681	SOURCE ID NUMBER 26-2930	4	15	10	10	10		
PROCESS EQUIPMENT	OPERATING MODE	· 5	15	10	15	10		
Fume Recovery System	Operating hours	6	10	5	<u>بر</u>	10		
CONTROL EQUIPMENT	OPERATING MODE	7						
DESCRIBE EMISSION POINT	· · · · · · · · · · · · · · · · · · ·	8						· · · · · · · · · · · · · · · · · · ·
22inch diameter stack		9					<u></u>	
on top of recovery tank	<u>.</u>	10		,				
HEIGHT ABOVE GROUND LEVEL	HEIGHT RELATIVE TO OBSERVER	11						-
25 ft. DISTANCE FROM OBSERVER	DIRECTION FROM DESERVER	12		-				
SER 55 TT EN Same	SunWes   Ensame	13						
DESCRIBE EMISSIONS	sa Same	14						
SIER OF ORDER	IF WATER DROPLET PLUME	15		<b></b>				
POINT IN THE PLUME AT WHICH OF ACT	Y WAS DESERMINED	16						· · · · · · · · · · · · · · · · · · ·
sa Afore STack To	End Same	17						
DESCRIBE PLUME BACKGROUND	1	18						
SIRT / C 45 / 41/15/1/2 BACKGROUND COLOR	END CAME	19					_ ,	
WIND SPEED /	SIGN CONDITIONS SIGN CONTIONS WIND DIRECTION SIGN SON THEMS & MICE WEI BULS TEMP BH PROPERTY	20						
SIER 3.5 Mph ENGSAME	son Son Then game	21						
AMBIENT TEMP SIER 36 F End Sa MA	WET BULS TEMP RH. percent	22						
STATE OF THE SALVE		23					-	
with C	OU! SAZ UA DIEW NORTH ARTOW	24						
Sun -	, <del>3</del>	25					- 1.	
Wind		25						
X	Emilian Point	27			,			
		28						
		29						
		30						
			RVER'S I			1517		
	Observer's Pasition		J. Tur			-1517		DATE
140			B				~	11-22-09
Sun	on Line		NZÁTION ppers					
ADDITIONAL INFORMATION		CERT	FIED BY		ir A	uthor:	itv	4.17.03
· · · · · · · · · · · · · · · · · · ·		Tak	e. C1	.cail A	714 A			11103
<u> </u>		CONT	NUED O	N VEO F	OFUM NO.	MBER	-	

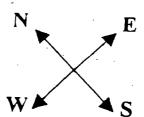




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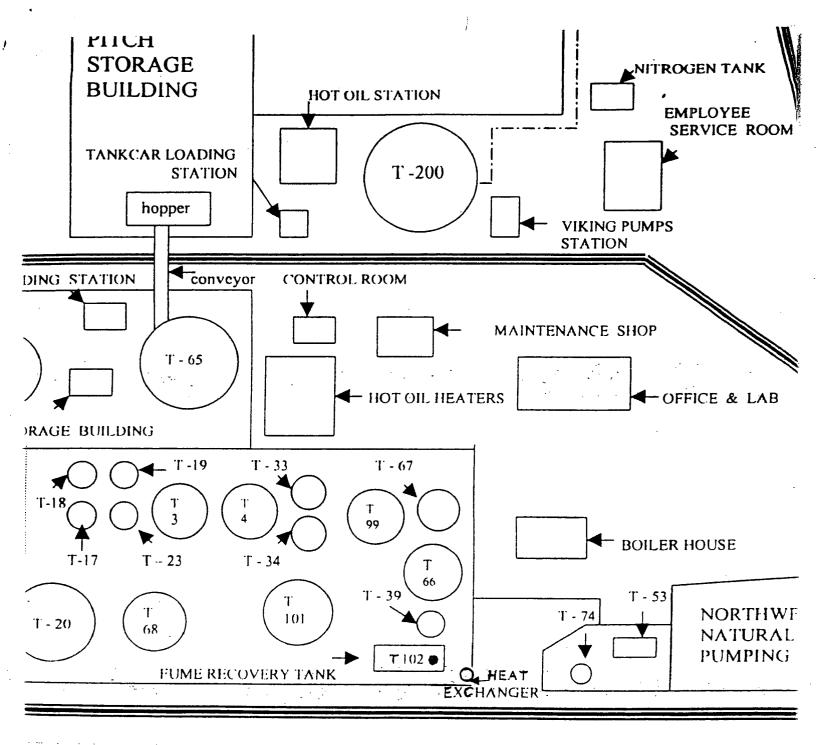
COMPANY NAME				PIVATION 2 - /s	DATE	'el	START TIME BND TIME O736			
Koppers Inc.			<b>*</b>	( - / 3		~	01	70/1411	0176	<u> </u>
STREET ADORESS 7540 N.W. St. Helens	Rd.		-	0	15	30	45		COMMENTS	
			1	15	15	10	12			
CITY	STATE	ZIP	2	15	15	15	10			<del></del> -
Portland	OR SOURCE ID NUM	97210	3	10	10	5	10			
PHONE (KEY CONTACT) 503-286-3681	26-2930	IBER	4	5	300	10	13			
PROCESS EQUIPMENT	O₽	ERATING MODE	. 5	15	10	3	10			
Fume Recovery System		erating hours	6	10	12	15	15			
CONTROL SQUIPMENT	OF	ERATING MODE	7						<del></del>	
DESCRIBE EMISSION POINT			8	-						
22inch diameter stack			9	<del> </del>	<u> </u>	<u> </u>			<del></del>	
and the second tank			10.							<del></del>
on top of recovery tank	HEIGHT RELATIV	E TO DESERVER	11					-,	· ·	
25 ft.	SER lift.	End same	-	1		-		<u>-</u>	•	· 
DISTANCE FROM OBSERVER	Start 5	En Same	12	<u> </u> 						<del></del>
DESCRIBE EMISSIONS /			13	<u> </u>		-				<del>-</del>
SER CONNING	Enc SAM	e	14	-						
EMISSION COLOR SIEN WAT End SANCE	:	•	15	<u> </u>						
SCOUT IN THE PILINE AT WHICH OPACE	Y WAS DETERME	NED	16							<u> </u>
	En San	10	17							
DESCRIBE PLUME BACHGROUND SIER #4/5/4/2 Traces	em Garas		18							
BACKGROUND COLOR	אכקדופאכב יאצ	s /	19							
SACKGROUND COLOR SENSON SENSON SPEED SENSON SAME	Star COM	Age SIM	20					-		
SIER 10 MORTO SAME	SE NOCT	hen same	21					-		
AMBIENT TEMP Size 347 End San	WET BULE TEMP	RH, percent	22				•			
			23					,		
SDURCE LAY	OUT SKETCH	Draw North Arrow	24				-	-		
Sun 👄		<b>9</b>	25		· . · .					. ;
Wind -			26					}		
	Emission Poin		27							
	<b>-</b>		28							<del> </del>
			29					<del></del>	<del></del>	
			30						2	
				DVER**	IAVE S	DD CT	<u> </u>			<u> </u>
	Observer's Posit			avers i J. Tu			-1517			
	2.231	uon		HVER'S					DATE	
140				1					12:15	24
Sun Loca				NZATO ppers						<del></del>
				PED BY					! DATE	
ADDITIONAL INFORMATION	•				ean 1	Air A	uthori	ty	4.17.	05
			CONT	MUED O	N VED F	ORM NU	MREP		TIT	T
<u> </u>								·		

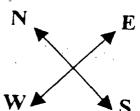




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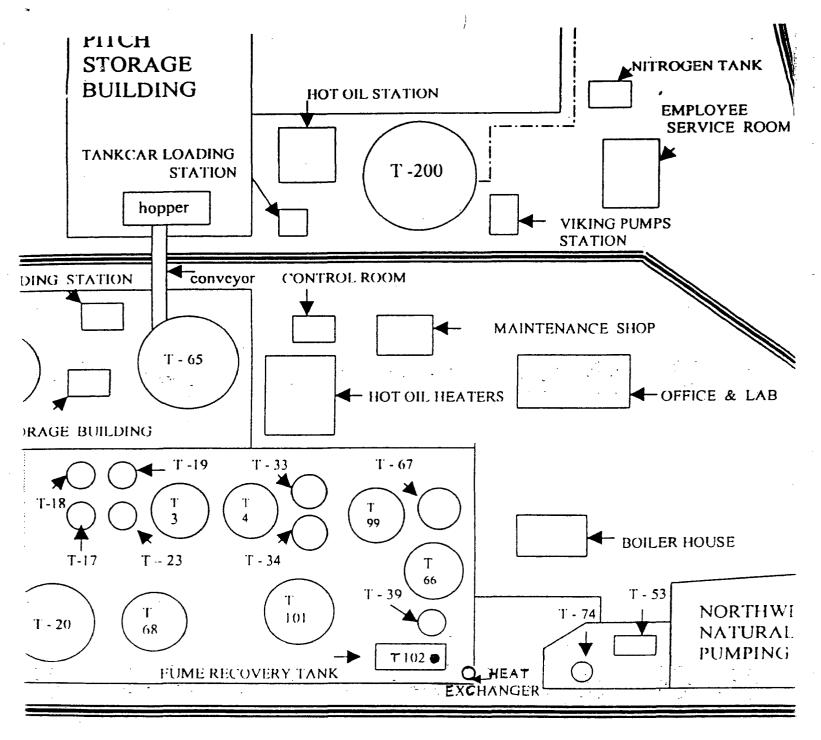
				7 VA I II	CIT FC	, MV		No.			
COMPANY NAME				FVATIO		7 3	START	TIME	END TIME		
Koppers Inc. STREET ADDRESS 7540 N.W. St. Helens	Rd.		SEC	0	15	30	45	1.0	COMME	VTS	
			1	0	5	5	15				
CITY	STATE	ZIP	2	5	5	3-	5				p. 4
Portland	OR	97210	] 3	7	<del>سرا</del>	سيرا	<u> </u>	1			
PHONE (KEY CONTACT) 503-286-3681	26-2930		4	0	0		5				
PROCESS EQUIPMENT		OPERATING MODE	5	5	0	0	0				
Fume Recovery System		Operating hour	s 6	0	0	1	, ~		·		
CONTROL EQUIPMENT		OPERATING MODE	7	5	5-	5	0				
DESCRIBE EMISSION POINT			8	0	0	0	0				
22inch diameter stack			9	0	0	0	5				
on top of recovery tank			10		!	:			٠	•	
HEIGHT ABOVE GROUND LEVEL 25 ft.	HEIGHT REL	ATIVE TO OBSERVER	11		· ·	<u> </u>	:	÷. ;-		. ,	
DISTANCE FROM OBSERVER		FROM OBSERVER	12	<u> </u>		<u>,                                     </u>	:				
Star 60 FT Eno Sante	Start 5 W	/ Enc Same	13		<del></del>	1	: .				-
DESCRIBE EMISSIONS			14		1	<del>:</del>	· · · · · · · · · · · · · · · · · · ·				
STERT ONNING	Enc SQ	ROPLET PLUME		-	1	+	!				
SIER White End Same	_	Detached	15	<u> </u>		<u> </u>	<u> </u>				
POINT IN THE PLUME AT WHICH OPAC	TITY WAS DETE	RMINED	16			1					
Sun / FT above stack	End Sa	emp	17								
DESCRIBE PLUME BACKGROUND			18			-		-	-		
SIERT TREES/HILSINGE BACKGROUND COLOR	SKY SONDIT		19				T				
SIER GREEN END	Star Cha	er Encsame		<del> </del>		†	T				
WIND SPEED	WIND DIRECT	TION End Same	21	<del> </del>	<del>                                     </del>	<u> </u>	i i	<u> </u>	<del> </del>		
SIRINI ENDS AME  AMBIENT TEMP  SIRIN 12º F END SAME	WET BULS T	EMP RH. percent	22	<del> </del>	1	<u>.</u>	!				
son 12° F End game	- <u> </u>	8396			1		1	<u> </u>	· · · · · · · · ·		
	YOUT SKETCH	Draw North Arro	=   23 =	<u> </u>	<u> </u>	1			· · ·	_	
Piume Piume			24	<u> </u>		.		<u>-</u>			·
Sun +	1_	_	25			1	İ				
Will		ν.	26							_	
	(X) Emission F	Point	27			İ	1		r		
			28		<del> </del>	i	<del></del> -				
	\$ P	•	29		<del>                                     </del>	1	1	<u> </u>			
			30		1	<u> </u>	<u> </u>		·		
				RVER'S	NAME (F	PINT)	<u> </u>		·		
	Observer s P	Position					1517		·		
	<b>&gt;</b>		OBSE	EVERS	SIGNATI	严/			DATE	17.	03
,	40*		ORGA	NEZATIO	N C	10	an	m.	/: /	<u> </u>	
Sun Loc	con Line		Kø	ppers	Inc.				· 		
ADDITIONAL INFORMATION			Yaki	FIED BY	lean	Air A	uthor	ity	DATE	17-	03
			CONT	CONTINUED ON VEO FORM NUMBER							
										-	

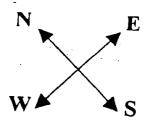




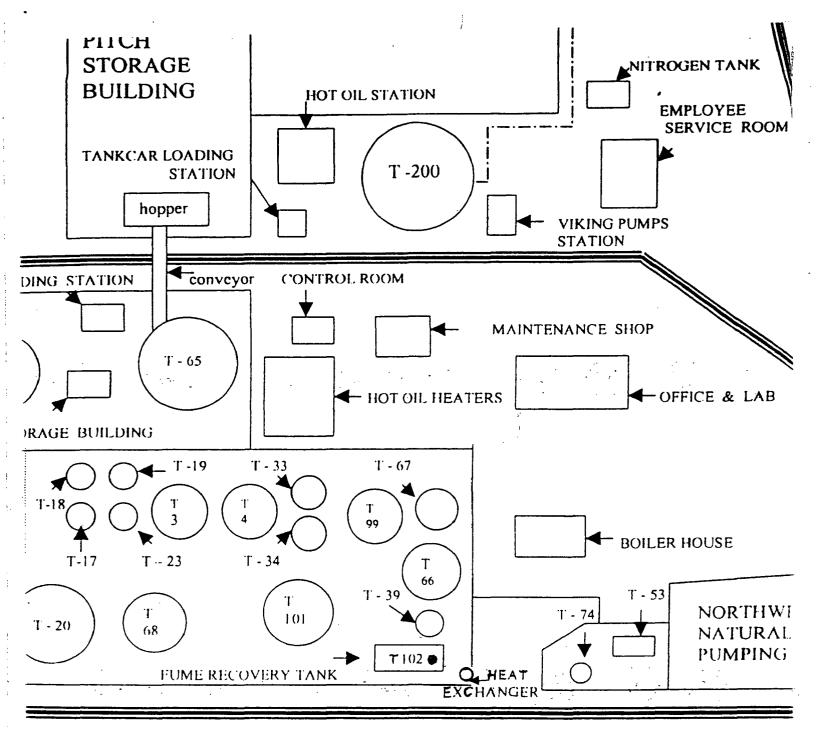
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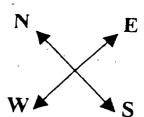
COMPANY NAME			OBSE	RYATION	DATE		START		END TIME		
Konners Inc.			8/	15/1	<u> 23</u>	<del>/</del>		720	0000		
STREET ADDRESS 7540 N.W. St.	Helens	Rd.		MEN	•	15	300	45		COMMENTS	
				1	0	0	0	0			
спу		STATE	20P	2	0	0	0	0			
Portland		OR SOURCE ID NUMBE	97210	3	0	5	5	0			
PHONE (KEY CONTACT) 503-286-3681		26-2930	27	4	5	5	5	5			
PROCESS EQUIPMENT			ATING MODE	- 5	0	5	0	0			
Fume Recovery Sy	<i>r</i> stem	to to	rating hours	6	0	5	5	0			
CONTROL EQUIPMENT		OPER	ATING MODE	7	0	0	0	0			
DESCRIBE EMISSION POINT				8						**************************************	
22inch diameter s		**************************************		9						· · · · · · · · · · · · · · · · · · ·	
on top of recover	cy tank.			10						<del></del>	
HEIGHT ABOVE GROUND LE	EVEL	HEIGHT RELATIVE		11		<del>†</del>					
25 ft. DISTANCE FROM OBSERVE	P (	Sur llft.	DBSERVER	12	<del>                                     </del>	<b> </b>	<del> </del>				
Start 55 FT End S.	ane	SunWest	Eno Same	13							
DESCRIBE EMISSIONS		Ero Same		14							
SIBIT ZAMINE EMISSION COLOR	<del>2</del>	IF WATER DROPLET		15		-					
	ene_	Attached 🗀	Detached (I)	16							
POINT IN THE PLUME AT WE Start of Start	HICH OPACE	End SCALL	)	17		<b></b>				<b></b>	
DESCRIBE PLUME RACYGROUND										All Total Control of the Control of	
son Fanning	•	Eno Saule		19							
Start GRAPA End S.	ane	SHERCAST	End Same	20			<u> </u>				
WIND SPEED 5 mg/h		WIND DIRECTION	1 00	20							
AMBIENT TEMP		WET BULB TEMP	End Servent	21							
STATE OF END STATE	me		84%	22							
Stack St	DURCE LAYO	DIST SKETCH	Draw North Arrow				ļ				
Pitume Sun —		1		24			-	-			
Wind -	<del></del>	Read		25					<del></del>		
	, , , , , , , , , , , , , , , , , , ,	<b>X</b>		26					****		
	X	FINISH POINT		27							
				28							
	.			29					,		
	į			30							
		_			WER'S N						
	_	Observer's Position			. Tur			-1517			
	140*	, 1		1	4/20	1/20				8/15/03	
	Sun Location	ri) Eine			<b>IZATION</b> pers				<del></del>	4-1	
ADDITIONAL INFORMATION				CERTIF	ED BY				i	DATE ,	
				Yakir	na Cle	ean A	ir Au	thori	ty	9/17/03	
				CONTIN	IUED ON	VEO FC	AUN MAK	BER			
				<u> </u>							



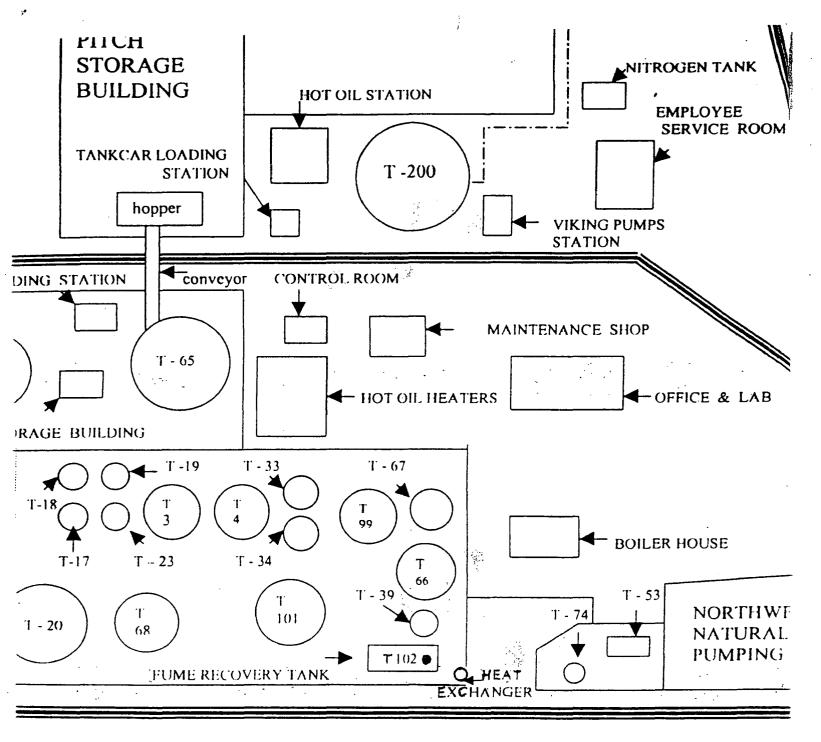


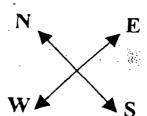
					_						
COMPANY NAME				TVATIO	PDATE	27	START TIME END TIME, OSOCI OSOCI				
Koppers Inc.						100	VCA.	Volla			
STREET ADDRESS 7540 N.W. St. Helens Rd.			-	0	15	30	45		COMMENTS	<b>.</b>	
		•	1	0	0	0	0			····	
CITY	STATE	ZIP	2	5	0	5	5	ļ			
Portland	OR	97210	3	سر		سوا	E				
PHONE (KEY CONTACT) 503-286-3681	HONE (KEY CONTACT) SOURCE ID NUMBER				3	3	10		<u> </u>	······································	
PROCESS EQUIPMENT	10	PERATING MODE	. 5	Σ.	5	0	10				
Fume Recovery System	1	perating hours			16	1/2					
CONTROL EQUIPMENT	0	PERATING MODE	7	0	10	10					
DESCRIBE EMISSION POINT			8		<u>.                                      </u>		1		<del></del>		
22inch diameter stack			9			İ					
on top of recovery tank			10	_					,		
25 ft.	Smr llft.	End same	. 11					tiv.			
DISTANCE FROM OBSERVER Star 65 FT End Came	DIRECTION FRO	OM OBSERVER	12					•	• •		
DESCRIBE EMISSIONS			13				·				
santof ling	En Sam	2	14	_		<u> </u>		<del></del>			
EMISSION COLOR	IF WATER DROP	PLET PLUME Detached C	15		<u> </u>						
POINT IN THE PLUME AT WHICH OPACEDY WAS DETERMINED											
san Above Stack I fl	End San	1.2	17	,							
DESCRIBE PLIME BACKGROUND	Fra dama		18	1							
BACKGROUND COLOR	SKY SONOTION	rs /	19	į							
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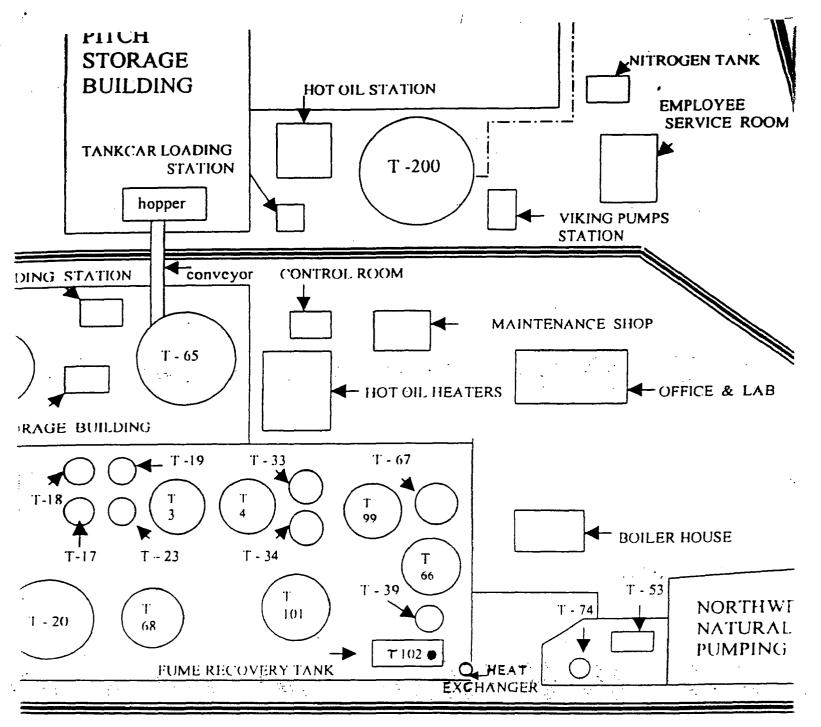


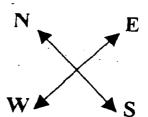


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Fume Recovery System	Operating hours	6	10	10	5	5	_	
CONTROL EQUIPMENT	OPERATING MODE	7	5	10	10	11		
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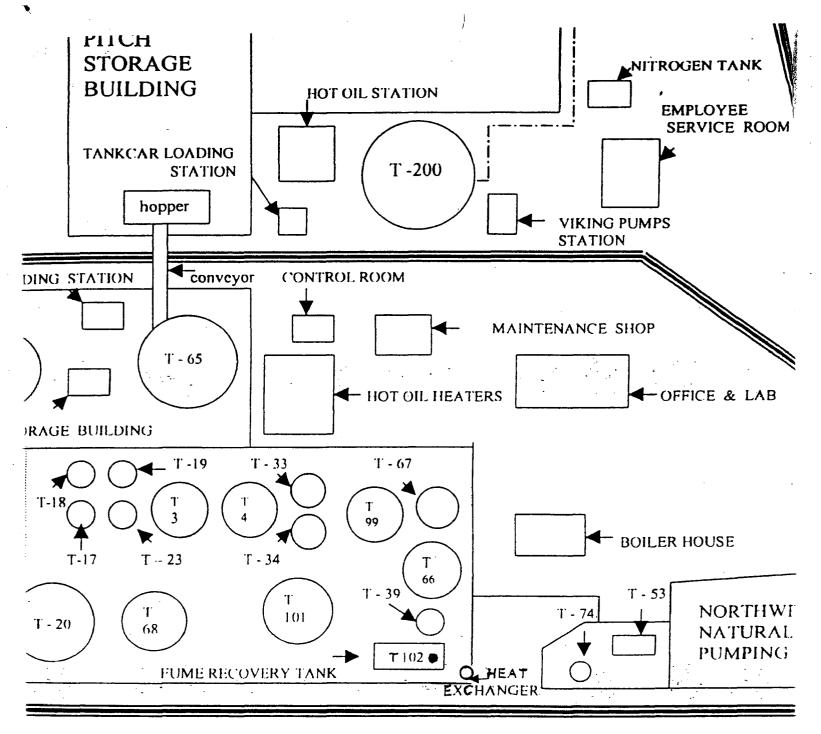


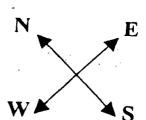




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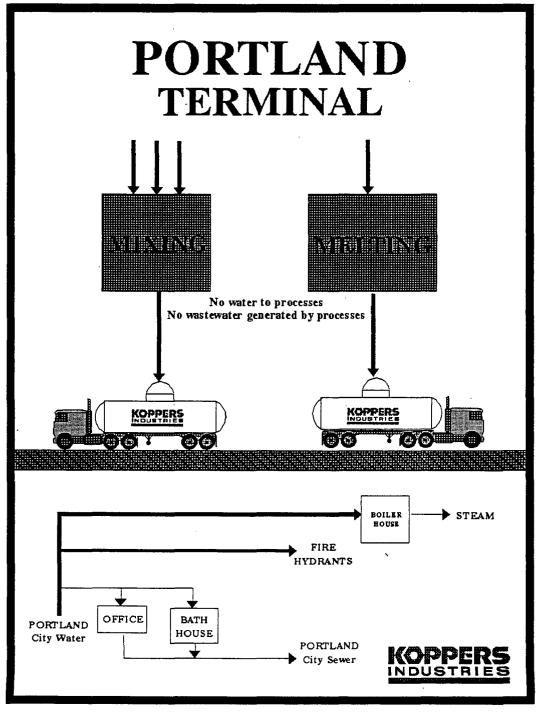


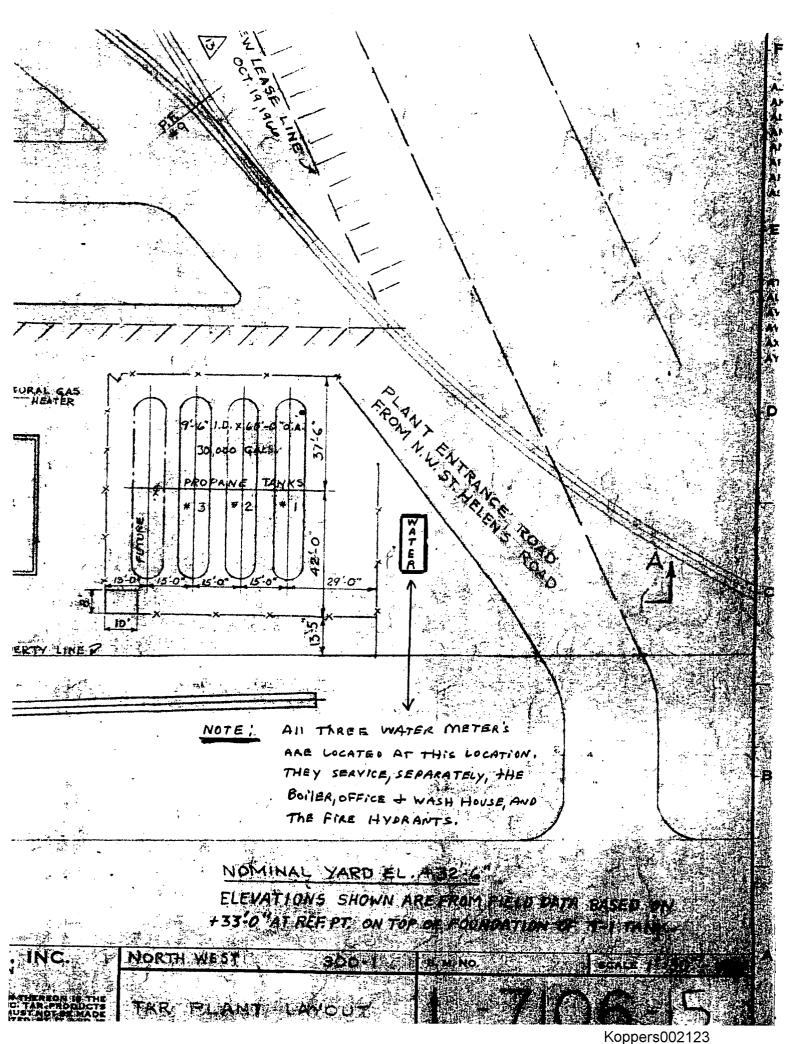


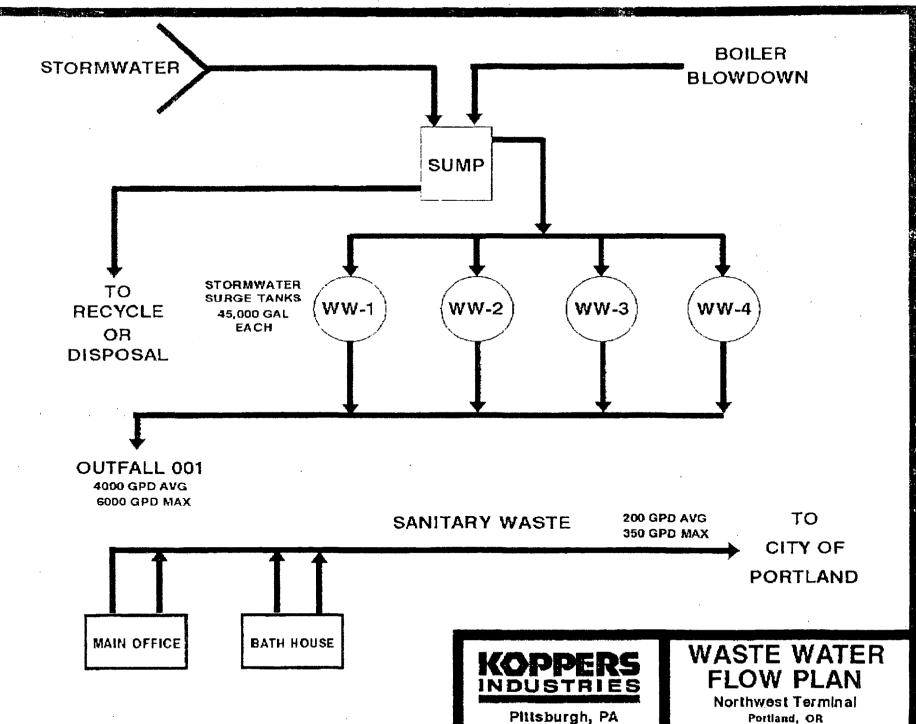
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### ATTACHMENT A-SCHEMATIC FLOW DIAGRAM

For each major activity in which wastewater is generated, draw a diagram of the flow of materials and water from start to completed activity, showing all unit processes generating wastewater. Number each unit process having wastewater discharges to the community sewer. Use these numbers when showing this unit process in the building layout in schematic. Use the space below or additional sheets of 8x11 paper. An example is provided on the backside.







# McCORMICK JAHNCKE GROUP

CHARLEY HAVNEN

CDR., USCG RET. CHAS. R. HAVNEN & ASSOC., INC.

200 Carondelet Street, New Orleans, LA 70130 Tel: (800) 493-3883 Fax: (504) 394-8869

II. REQUIREMENTS FOR COMPLIANCE

Table 1.0

LIANCE hang to half for he hand hand so Dock Transfer of Coal

Facility Requirements for the Cross Dock Transfer of Coal

Tar Pitch (molten)

# Standards Applicable to Facilities

	Item	Source	Comment
1	Facility Response Plan (FRP) (USCG)	33 CFR Part 154 Subpart I	Plan submitted to & approved by local USCG COTP for each facility.
2	Cargo Operations Manual	33 CFR Part 154 Subpart B	Manual submitted to & approved by local USCG COTP for each facility.
3	Spill Prevention, Containment & Countermeasures (EPA)	40 CFR Part 112	These plans probably exist already for each facility. They will need to be amended to reflect the molten marine facility. An SPCC is needed for each facility.
4	Facility Response Plan (EPA)	40 CFR Part 112	Required for facility with storage over 42,000 gallons and over water vessel transfers for each facility.
5	Pollution Prevention Regulations, 33 CFR Part 154 & Oil & Hazardous Material Transfer Operations, 33 CFR Part 156	33 CFR Part 154 & 33 CFR Part 156	Compliance linked to inspection by local USCG COTP when Cargo Operations Manual approved & vessel at facility

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## Facility Response Plan (FRP) -- 33 CFR Part 154 Subpart I

Plan submitted to & approved by local USCG COTP for each facility.

The USCG requirements for Facility Response Plans (FRP) are located at 33 CFR 154 Subpart I based upon the capacity of the largest vessel that calls at the facility. If the largest vessel has a capacity of over 250 barrels of oil (in this case coal tar pitch (molten)) then a Facility Response Plan must be submitted to and approved by the local USCG Captain of the Port (COTP). The marine transfer facility is normally considered by the USCG to end at the first block valve off the dock. The USCG jurisdiction ends at this block valve and the EPA jurisdiction commences. Each facility will need a separate FRP although each can be a clone of every other one. The capacities in the facility response plan are based on the capacity of the piping system and the storage tanks. The USCG portion of the facility is separate from the tank farm which comes under EPA jurisdiction.

Each FRP must be submitted to and approved by the local COTP. The contents of each FRP is established in the regulations and includes the following:

- Introduction and plan contents
- Emergency Response Action Plan:
  - Notification procedures
  - Facility's spill mitigation procedures
    - For average most probable, maximum most probable and worst case discharges
    - Prioritized procedures for facility personnel to mitigate spill, to include
      - Failure of manifold, mechanical loading arm, other transfer equipment or hoses
      - Tank overfill
      - Tank failure
      - Piping rupture
      - Piping leak both under pressure and not under pressure
      - Explosion or fire, and
      - Equipment failure (pumping system, relief

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- valve or other general equipment relevant to operational activities)
- Listing of equipment and the responsibilities of facility personnel to mitigate an average most probable discharge
- Facility's response activities
  - Description of facility personnel responsibilities to initiate a response and supervise response resources pending the arrival of the qualified individual (QI)
  - Description, responsibilities and authority of the qualified individual
  - Describe the organizational structure used to manage the response actions and must include:
    - Command and control
    - Public information
    - Safety
    - Liaison with government agencies
    - Spill Operations
    - Planning
    - Logistics support, and
    - Finance
  - Identify oil spill removal organizations and the spill management team to:
    - Be capable of providing the following response resources
      - Equipment and supplies to meet the requirements of the regulations as applied to this specific facility
      - Trained personnel necessary to continue operation of the equipment and staff for the first 7 days of the response
    - Job description of each member of the *spill* management team
- Fish and wildlife and sensitive environments
  - Identify economically important and environmentally sensitive areas as identified in the USCGs Area Contingency Plan (ACP)
  - For a worst case discharge from the facility:
    - List all fish and wildlife and sensitive

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- environments identified in the ACP which may be potentially impacted
- Describe all response actions that the facility anticipates taking to protect these fish and wildlife and sensitive environments
- Contain a map or chart showing the location of those fish and wildlife and sensitive environments which are potentially impacted
- For a worst case discharge, identify appropriate equipment and required personnel available by contract or other approved means to protect fish and wildlife and sensitive environments within the distances calculated:
  - Identify appropriate equipment and required personnel to protect all fish and wildlife and sensitive environments for required calculated distances that coal tar pitch (molten) may travel if spilled
  - Calculate distances
    - For persistent oils, 15 miles or the maximum movement generated by flood and ebb tides
    - A spill trajectory or model may be substituted if acceptable to the local COTP
    - EPAs calculated methodology may be used
  - Based on historical data the COTP may require additional fish and wildlife and sensitive environments also be protected
- Disposal plan in accordance with federal, state and local requirements
- Training and exercises:
  - Training procedures: Describe the training procedures and programs the facility responders and spill management team
    - Each individual with responsibilities under the plan must be trained. This must include OSHA HAZWOPER training for casual labor and

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- volunteers as per 29 CFR 1910.120
- Training records must be maintained and be made available to the USCG upon request
- Oil spill removal organizations identified in the FRP must provide records to assure owner/operator that the response organization has the equipment and personnel claimed or are specifically approved
- Facility owner and operator remain responsible to insure that response personnel are all qualified under OSHA HAZWOPER standards, 29 CFR 1910.120
- Exercise procedures: Describe the exercise program to be carried out including both announced and unannounced exercises. Including at a minimum:
  - Qualified individual notification (quarterly)
  - Spill management team tabletop exercises
     (annually). In a three year period at least one
     of these exercises must include a worst case
     discharge scenario
  - Equipment deployment exercise:
    - Semiannually for facility owned and operated equipment
    - Annually for oil spill removal organization equipment
  - Emergency procedures exercises (optional)
  - Annually, at least one of the exercises (other than a OI notification) must be unannounced
  - Exercises programs should be designed so that all components of the response plan are exercised at least once every three years. All components do not have to be exercised at one time throughout the three year period
  - A facility owner or operator shall participate in unannounced exercises for an average most probable spill, as directed by the COTP, once every three years.
  - A facility owner or operator shall participate in Area exercises as directed by the applicable on-Scene Coordinator (EPA or USCG).
  - A facility owner or operator shall ensure that

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adequate records of all required exercises are maintained at the facility for at least 3 years. They shall be made available to the Coast Guard upon request.

- The planned exercise program must be specified in the FRP.
- Plan review and update procedures
  - At least an annual review and update is required
  - Changes in the local Area Contingency Plan that have been in effect for at least 6 months shall be included.
- Appendices:
  - Facility-specific information
  - List on contacts
  - Equipment lists and records
  - Communications plan
  - Site-specific safety and health plan
  - List of acronyms and definitions

The specific gravity of coal tar pitch (molten) exceeds one.

Because of that the USCG classifies it as a Group V oil, or a sinker.

As such additional information must be included in the FRP:

- Procedures and strategies for responding to a worst case discharge of a Group V oil to the maximum extent practicable
- Sources of the equipment and supplies necessary to locate, recover, and mitigate such a discharge
- Ensure that any equipment identified is capable of operating in the conditions expected in the geographic area in which the facility operates. Including:
  - Ice conditions
  - Debris
  - Temperature ranges, and
  - Weather-related visibility
- Identify the availability of resources needed for Group V locating and removal and must include:
  - Sonar, sampling equipment or other methods for locating the oil on the bottom or suspended in the water column
  - Containment boom, sorbent boom silt curtains, or other methods for containing the oil that may remain floating on the surface or to reduce spreading on the bottom.
  - Dredges, pumps, or other equipment necessary to recover oil

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- from the bottom and shoreline
- Equipment necessary to assess the impact of such discharges, and
- Other appropriate equipment necessary to respond to a discharge involving that type oil
- The special Group V resources identified in the FRP must be capable of being at the spill site within 24 hours of the discharge
- Identify firefighting resources located at the facility. Facility's that can not rely on sufficient local fire fighting resources must identify and ensure by contract or other approved means the availability of adequate firefighting resources. The FRP must also identify an individual located at the facility to work with the fire department for petroleum oil fires. This individual shall also verify that sufficient well trained firefighting resources are available within a reasonable response time to a worst case scenario. The individual may be the qualified individual or another appropriate individual located at the facility.

#### Item 2

Cargo Operations Manual -- 33 CFR Part 154 Subpart B

Manual submitted to & approved by local USCG COTP for each facility.

The USCG will also require that a Cargo Operations Manual be prepared for each facility and submitted to the local USCG COTP. These requirements are located at 33 CFR Part 154, Subpart B. As with FRP's each operations manual must be specific to each molten facility and approved by each COTP.

Each Cargo Operations Manual must contain the following:

- Geographic location of the facility
- A physical description of the facility including a plan showing mooring areas, transfer locations, control stations, and locations of safety equipment
- The hours of operation
- The sizes, types, and number of vessels that the facility can handle simultaneously
- For each product
  - Generic or chemical name; and

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- The following cargo information:
  - The MARPOL name of the product or the name from USCG regulations
  - Appearance of cargo
  - Description of odor of cargo
  - Hazards involved in handling the cargo
  - Instructions for safe handling the cargo
  - Procedures to be followed if the cargo spills or leaks or if a person is exposed to the cargo, and
  - List of fire fighting procedures and extinguishing agents effective with fires involving the cargo
- The minimum number of persons on duty during transfer operations and their duties
- Names and telephone numbers of facility, Coast Guard, and other personnel who may be called by the employees of the facility in an emergency
- A description of each communication system required by the USCG rules
- The location and facilities of each personnel shelter, if any
- A description and instructions for the use of drip and discharge collection and vessel slop reception facilities, if any
- A description and the location of each emergency shutdown system
- Quantity, types, locations, and instructions for use of monitoring devices if required
- Quantity, type, location, instructions for use, and time limits for gaining access to the containment equipment required
- Quantity, type location, and instructions for the use of fire extinguishing equipment required by USCG rules
- The maximum relief valve setting (or system shut off head) for each transfer system
- Procedures for:
  - Operating each loading arm including the limitations of each loading arm
  - Transferring oil or hazardous material
  - Completion of pumping and
  - Emergencies
- Procedures for reporting and initial containment of oil or hazardous material discharges
- A brief summary of applicable federal, state, and local oil or hazardous material pollution laws and regulations

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- Procedures for shielding portable lights authorized by the COTP, if used
- A description of the training and qualification program for persons in charge
- Statements explaining that each hazardous materials transfer hose is marked with either the name of each product which may be transferred through the hose or with letters, numbers or other symbols representing all such products and the location in the operations manual where a chart or list of the symbols used and a list of compatible products which may be transferred through the hose may be found.

### Item 3

Spill Prevention, Containment & Countermeasure (EPA) -- 40 CFR Part 112

These plans probably exist already for each facility. They will need to be amended to reflect the molten marine facility. An SPCC is needed for each facility.

Facility requirements are generally considered to originate with the EPA Spill Prevention, Containment and Countermeasure (SPCC) Plans. These plans should already exist for every established industrial facility. They will need to be modified for any changes made as a result of establishing a marine facility at that location. The regulations are contained in 40 CFR Part 112. It is our understanding that these plans are accepted by EPA without a detailed review if submitted by a Professional Engineer (PE). Much of the information contained in the SPCC goes into the FRP in one form or another.

### Item 4

Facility Response Plan (EPA) -- 40 CFR Part 112

Required for facility with storage over 42,000 gallons and over water vessel transfers for each facility.

EPA also requires Facility Response Plans for facilities with a storage capacity over

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42,000 gallons that do transfer operations to and from vessels over water. Koppers current molten coal tar operations may fall below the current threshold and not require EPA FRP's. Recently the EPA reviewed the need for what appears to be duplication of the USCG FRP requirements and concluded that the EPA FRP requirements would continue. Each FRP must be written in accordance with the Area Contingency Plan in effect in that EPA Region: Region VI for Louisiana and Texas and Region X for Washington and Oregon. EPA Area Contingency Plans tend to diverge less than twenty five percent from one region to another.

The FRP as required by EPA at 40 CFR Part 112 specifies that the following be included in the Plan:

- Emergency Response Action Plan as a stand alone document or a part of the FRP. To include:
  - Identity and telephone number of a qualified individual having full authority, including contracting authority, to implement removal actions
  - Identity of individuals or organizations to be contacted in the event of a discharge. To include federal official, state officials and responding organizations
  - A description of the information to pass to response personnel
  - A description of the facility response equipment and its location
  - A description of response personnel capabilities, including duties of persons at the facility during a response action and their response times and qualifications
  - Plans for evacuation of the facility and a reference to community evacuation plans, as appropriate
  - A description of immediate measures to secure the source of the discharge and to provide adequate containment and drainage of spilled oil
  - A diagram of the facility
- Facility information: Location & type facility, identity and tenure of the present owner and operator, and the identity of the *qualified individual*
- Information about emergency response
  - Identity of private personnel and equipment necessary to remove to the maximum extent practicable a worst case discharge and other discharges of oil as described in the FRP
  - Evidence of contracts or other approved means for ensuring the availability of such personnel and equipment
  - Identity and telephone number of individuals or organizations to be contacted in the event of a discharge so that immediate

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- communications between the qualified individual and federal officials and responders can be ensured
- A description of response personnel capabilities, including the duties of persons at the facility during a response action and response times and qualifications
- A description of facility response equipment, location of equipment and equipment testing arrangements
- Plans for evacuation of the facility and a reference to community evacuation plans as appropriate
- A diagram of evacuation routes
- A description of the duties of the *qualified individual* that include:
  - Activate internal alarms and hazard communication systems to notify all facility personnel
  - Notify all response personnel as needed
  - Identify the character, exact source, amount, and extent of the release as well as other items needed for notification
  - Notify and provide necessary information to the appropriate federal, state and local authorities with designated response roles, including the National Response Center, State Emergency Response Commission, and Local Emergency Planning Committee
  - Assess the interaction of the spilled substance with water and/or other substances stored at the facility and notify response personnel at the scene of that assessment
  - Assess the possible hazards to human health and the environment due to the release, both direct and indirect effects
  - Assess and implement prompt removal actions to contain and remove the substance released
  - Coordinate rescue and response actions as previously arranged with all response personnel
  - Use authority to immediately assess company funding to initiate cleanup activities
  - Direct cleanup activities until properly relieved of this responsibility
- Hazard evaluation: The FRP shall discuss the facilities's known or reasonably identifiable history of discharges reportable under 40 CFR Part 110 for the entire life of the facility and shall identify areas within the facility where discharges could occur and what the potential effects of the discharges would be on the affected environment using the distances calculated.

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- Response planning levels: The FRP shall include discussion of specific planning scenarios for:
  - A worst case discharge
  - A discharge of 2,100 gallons or less, provided that this amount is less than the worst case discharge amount.
  - A discharge greater than 2,100 gallons and less than or equal to 36,000 gallons or 10 percent of the capacity of the largest tank at the facility, whichever is less
- Discharge detection systems: The FRP shall describe the procedures and equipment used to detect discharges
- Plan implementation: The FRP shall describe:
  - Response actions to be carried out by facility personnel or contracted personnel under the FRP to ensure the safety of the facility and to mitigate or prevent discharges described or a substantial threat of such discharges
  - Describe the equipment to be used in each scenario
  - Plans to dispose of contaminated cleanup materials
  - Measures to provide adequate containment and drainage of spilled oil
- For self-inspection, drills/exercises, and response training, the FRP shall include:
  - A checklist and record of inspections for tanks, secondary containment, and response equipment
  - A description of the drill/exercise program to be carried out under the FRP
  - A description of the training program to be carried out under the FRP
  - Logs of discharge prevention meetings, training sessions, and drills exercises. May be an annex to the plan
- Diagrams: The response plan shall include site plan and drainage plan diagrams
- Security systems: The FRP shall include a description of facility security systems
- Response plan cover sheet: The FRP shall include a completed FRP cover sheet provided in the regulations

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## Pollution Prevention Regulations -- 33 CFR Part 154

Hazardous Material Transfer Operations - 33 CFR Part 156

Compliance linked to inspection by local USCG COTP when Cargo Operations Manual approved & vessel at facility.

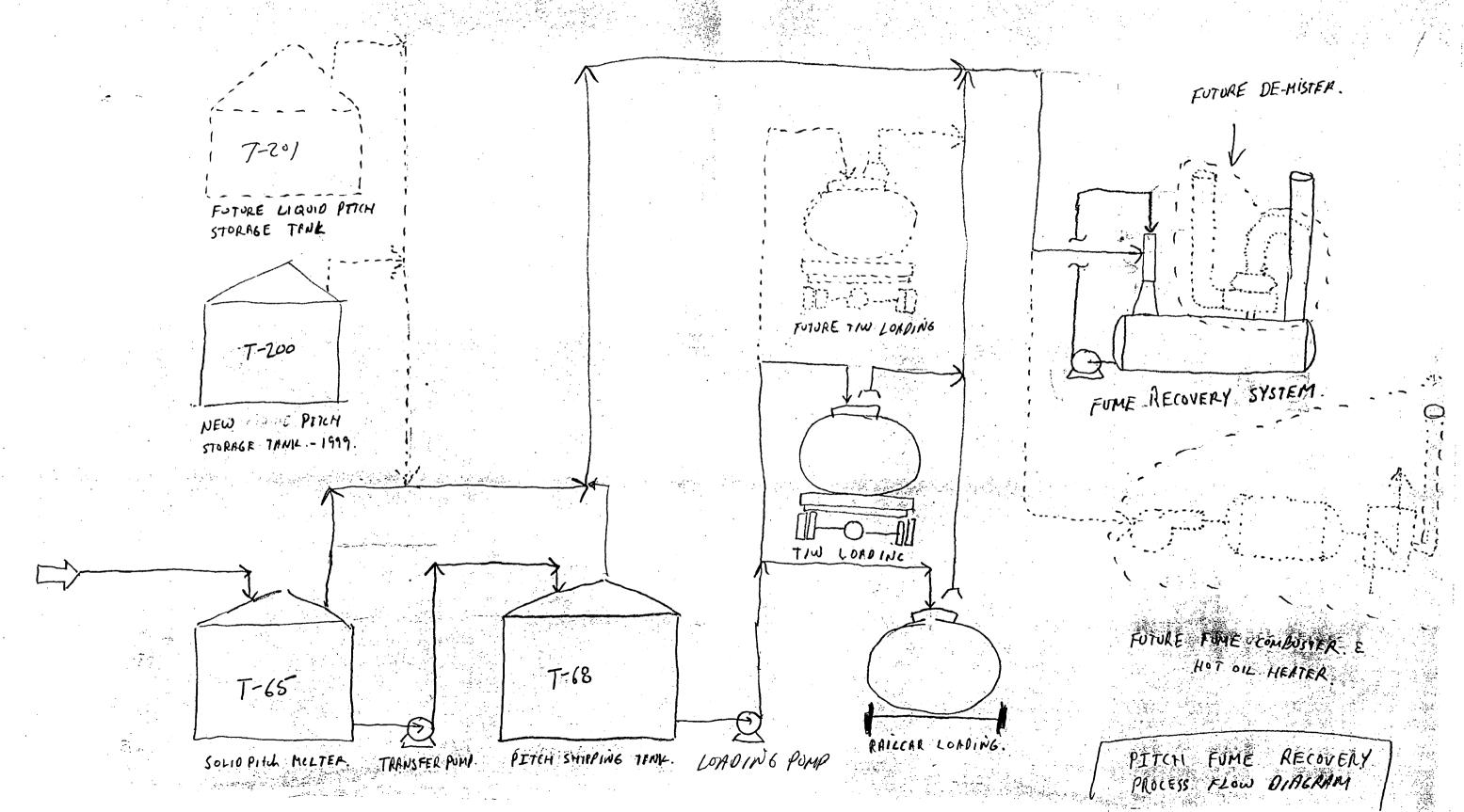
The USCG, Pollution Prevention Regulations, 33 CFR Part 154 & Oil & Hazardous Material Transfer Operations, 33 CFR Part 156 are applicable to facilities in addition to the Cargo Operations Manuals and Facility Response Plans. They specify engineering design and operations requirements for facilities and vessels.

These regulations include several items not included in the discussions about FRPs and Cargo Operations Manuals:

- Equipment requirements for facilities
- Facility operational requirements
- Vapor control system standards
- Oil and hazardous material transfer operations

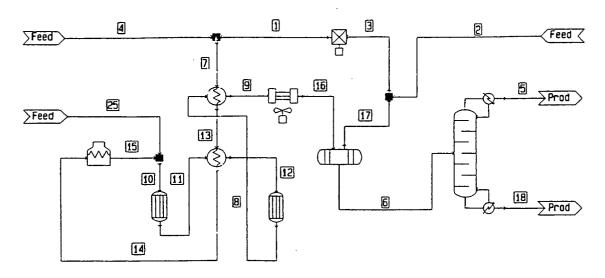
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# **CHEMCAD III**

# **Process Flowsheet Simulator**





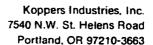
# INTUITIVE CHEMICAL ENGINEERING

#### Chemstations, Inc.

2901 Wilcrest Drive, Suite 305, Houston, Texas 77042, U.S.A. Telephone (713) 978-7700 • Fax (713) 978-7727

## Chemstations-Europe

(Chemstations Deutschland GmbH) Sudstr. 39, D-46562 Voerde, Germany Telephone (49 281) 943 0110 • Fax (47 22) 286 981





Amos S. Kamerer

Telephone: 503-286-3681 Fax: 503-285-2831

April 16, 2001

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97202

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: Spill Prevention, Control and Countermeasure Plan.

Dear Mr. Zais,

Attached please find a revised copy of page # 11 of our SPCC Plan dated February 24, 2000. After my letter to you last week updating pages # 11 & # 26 of the SPCC Plan, it was noticed by one of our employee's that the tank volumes listed on page # 11 of the SPCC Plan, did not match, in all cases, with our plant tank volume charts. An investigation of these differences showed that the volumes on the SPCC Plant tank list came from an old plant pre-construction drawing of these tanks. The plant volume tank list that is used every day, was developed after the tanks were constructed and are the accurate volumes that should be used. These differences are relatively minor, however, I felt it was important that our SPCC Plan, be correct.

I am sorry for the inconvenience this is causing you, sending you this revision, after just sending you the previous revision last week.

Should you have any questions in this regard, I can be reached at 503/286-3681.

mos S. Kamerer

Sincerel



Amos S. Kamerer

Koppers Industries, Inc. 7540 N.W. St. Helens Road Portland, QR 97210-3663

> Telephone: 503-286-3681 Fax: 503-285-2831

April 16, 2001

United States Coast Guard 6767 N Basin Avenue Portland, Oregon 97217-3992

Attention: LCDR Ed Parsons
Marine Safety Officer

Reference: Spill Prevention, Control and Countermeasure Plan.

Dear LCDR Parsons,

Attached please find a revised copy of page # 11 of our SPCC Plan dated February 24, 2000. After my letter to you last week updating pages # 11 & # 26 of the SPCC Plan, it was noticed by one of our employee's that the tank volumes listed on page # 11 of the SPCC Plan, did not match, in all cases, with our plant tank volume charts. An investigation of these differences showed that the volumes on the SPCC Plant tank list came from an old plant pre-construction drawing of these tanks. The plant volume tank list that is used every day, was developed after the tanks were constructed and are the accurate volumes that should be used. These differences are relatively minor, however, I felt it was important that our SPCC Plan, be correct.

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Amøs S. Kamerer

Sincere



Koppers Industries, Inc. 7540 N.W. St. Helens Road Portland, OR 97210-3663

Amos S. Kamerer

Telephone: 503-286-3681 Fax: 503-285-2831

April 16, 2001

Portland Fire Bureau 2915 SE 13<sup>th</sup> Place Portland, Oregon 97202

Attention: William N. Henle

Hazardous Materials Coordinator

Reference: Spill Prevention, Control and Countermeasure Plan.

Dear Mr. Henle,

Attached please find a revised copy of page # 11 of our SPCC Plan dated February 24, 2000. After my letter to you last week updating pages # 11 & # 26 of the SPCC Plan, it was noticed by one of our employee's that the tank volumes listed on page # 11 of the SPCC Plan, did not match, in all cases, with our plant tank volume charts. An investigation of these differences showed that the volumes on the SPCC Plant tank list came from an old plant pre-construction drawing of these tanks. The plant volume tank list that is used every day, was developed after the tanks were constructed and are the accurate volumes that should be used. These differences are relatively minor, however, I felt it was important that our SPCC Plan, be correct.

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Amos S. Kamerer

Sinceré



Amos S. Kamerer

Koppers Industries, Inc. 7540 N.W. St. Helens Road Portland, OR 97210-3663

> Telephone: 503-286-3681 Fax: 503-285-2831

April 16, 2001

City of Portland Bureau of Environmental Services 6543 N Burlington Avenue Portland, Oregon 97203-5452

Attention: Miguel Santana

Permit Manager

Reference: Spill Prevention, Control and Countermeasure Plan.

Dear Mr. Santana,

Attached please find a revised copy of page # 11 of our SPCC Plan dated February 24, 2000. After my letter to you last week updating pages # 11 & # 26 of the SPCC Plan, it was noticed by one of our employee's that the tank volumes listed on page # 11 of the SPCC Plan, did not match, in all cases, with our plant tank volume charts. An investigation of these differences showed that the volumes on the SPCC Plant tank list came from an old plant pre-construction drawing of these tanks. The plant volume tank list that is used every day, was developed after the tanks were constructed and are the accurate volumes that should be used. These differences are relatively minor, however, I felt it was important that our SPCC Plan, be correct.

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Sincerety

Amos/S. Kamerer

CC: T. Self, KII

## SPCC AND CONTINGENCY PLAN, PORTLAND PLANT, KOPPERS INDUSTRIES

# Table 3.8 TANK LISTING TABLE Koppers Industries, Northwest Plant

Tank No.	Current use	Last contained	Capacity (000)
1.	SW Surge	Crude Tar	.660 M
2.	SW Surge	Crude Tar	1065 M
3.	SW Surge	Methyl Solvent	99 M
4.	SW Surge	Lt. Uncorrected Creosote	99 M
11.	SW Surge	Creosote	254 M
12.	SW Surge	Unknown	57 M
17.	SW Surge	Heavy Oil	20 M
18.	SW Surge	NSR Oil	20 M
19.	SW Surge	P & R Oil	20 M
20.	SW Surge	Creosote	317 M
23.	SW Surge	Lt. Uncorrected Creosote	20 M
33.	Heavy Oil	Heavy Oil	45 M
34.	SW Surge	NSR Oil .	45 M
39.	SW Surge	Creosote	20 M
53.	SW Surge	Creosote	10 M
65.	Liquid Pitch	Heavy Oil	761 M
66.	SW Surge	Creosote	191 M
67.	Heavy Oil	Heavy Oil	102 M
68.	Liquid Pitch	Liquid Pitch	248 M
. 74.	SW Surge	Creosote	20 M
99.	SW Surge	Creosote	209 M
101.	SW Surge	Creosote	759 M
102.	Fume Tank	Heavy Oil	9.3 M
200	Liquid Pitch	Liquid Pitch	2100 M
V201	SW Surge	Liquid Pitch	19 M
V207	SW Surge	Liquid Pitch	19 M
240	Heat Transfer Oil	Heat Transfer Oil	2 M
250	Heat Transfer Oil	Heat Transfer Oil	2 M
SW #1	Storm Water (SW)		45 M
SW #2	Storm Water (SW)		45 M
SW #3	Storm Water (SW)		45 M
SW #4	Storm Water (SW)		45 M
SW #5	Storm Water (SW)		20 M
SW #6	Storm Water (SW)		20 M



Koppers Industries, Inc. 7540 N.W. St. Helens Road Portland, OR 97210-3663

Amos S. Kamerer Plant Menager Telephone: 503-286-3681 Fax: 503-285-2831

April 9, 2001

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: Spill Prevention, Control and Countermeasure Plan.

Dear Mr. Zais,

Attached please find revised copies of pages # 11 and # 26 of our SPCC Plan dated February 24, 2000. The changes are a result of a recent Portland Fire Bureau site inspection and their request that we number, and mark, the six buildings that are occupied here at the terminal. This has been done and the site map attached has been modified to reflect these changes.

Should you have any questions in this regard, I can be reached at 503/286-3681.

Amos S. Kamerer

Sincere



Amos S. Kamerer

Koppers Industries, Inc. 7540 N.W. St. Helens Road Portland, OR 97210-3663

> Telephone: 503-286-3681 Fax: 503-285-2831

April 9, 2001

City of Portland Bureau of Environmental Services 6543 N Burlington Avenue Portland, Oregon 97203-5452

Attention: Derik E. Vowels

Permit Manager

Reference: Spill Prevention, Control and Countermeasure Plan.

Dear Mr. Vowels,

Attached please find revised copies of pages # 11 and # 26 of our SPCC Plan dated February 24, 2000. The changes are a result of a recent Portland Fire Bureau site inspection and their request that we number, and mark, the six buildings that are occupied here at the terminal. This has been done and the site map attached has been modified to reflect these changes.

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Sincerely,

Amos S. Kamerer



Koppers Industries, Inc. 7540 N.W. St. Helens Road Portland, OR 97210-3663

Amos S. Kamerer

Telephone: 503-286-3681 Fax: 503-285-2831

April 9, 2001

United States Coast Guard 6767 N Basin Avenue Portland, Oregon 97217-3992

Attention: LCDR Ed Parsons

Marine Safety Officer

Reference: Spill Prevention, Control and Countermeasure Plan.

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Amos S. Kamerer

Sincerely.



Amos S. Kamerer

Koppers Industries, Inc. 7540 N.W. St. Helens Road Portland, OR 97210-3663

> Telephone: 503-286-3681 Fax: 503-285-2831

April 9, 2001

Portland Fire Bureau 2915 SE 13<sup>th</sup> Place Portland, Oregon 97202

Attention: William N. Henle

Hazardous Materials Coordinator

Reference: Spill Prevention, Control and Countermeasure Plan.

Dear Mr. Henle,

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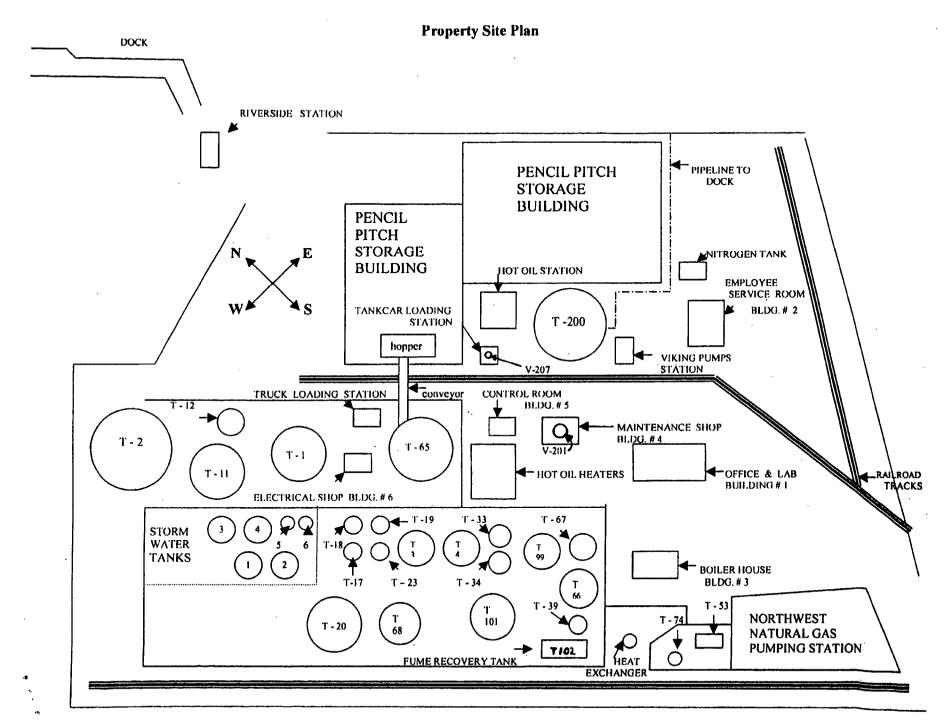
Sincerely,

Amos S. Kamerer

#### SPCC AND CONTINGENCY PLAN, PORTLAND PLANT, KOPPERS INDUSTRIES

Table 3.8
TANK LISTING TABLE
Koppers Industries, Northwest Plant

Tank No.	Current use	Last contained	Capacity (000)
1.	SW Surge	Crude Tar	60 M
2.	SW Surge	Crude Tar	1065 M
3.	SW Surge	Methyl Solvent	99 M
4.	SW Surge	Lt. Uncorrected Creosote	99 M
11.	SW Surge	Creosote	254 M
12.	SW Surge	Unknown	57 M
17.	SW Surge	Heavy Oil	20 M
18.	SW Surge	NSR Oil	20 M
19.	SW Surge	P & R Oil	20 M
20.	SW Surge	Creosote	317 M
23.	SW Surge	Lt. Uncorrected Creosote	20 M
33.	Heavy Oil	Heavy Oil	45 M
34.	SW Surge	NSR Oil .	45 M
39.	SW Surge	Creosote	20 M
53.	SW Surge	Creosote	10 M
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66.	SW Surge	Creosote	191 M
67.	Heavy Oil	Heavy Oil	102 M
68.	Liquid Pitch	Liquid Pitch	245 M
74.	SW Surge	Creosote	20 M
99.	SW Surge	Creosote	758 M
102.	Fume Tank	Heavy Oil	10 M
200	Liquid Pitch	Liquid Pitch	2000 M
V201	SW Surge	Liquid Pitch	15 M
V207	SW Surge	Liquid Pitch	15 M
240	Heat Transfer Oil	Heat Transfer Oil	2 M
250	Heat Transfer Oil	Heat Transfer Oil	2 M
SW #1	Storm Water (SW)		45 M
SW #2	Storm Water (SW)	·	45 M
SW #3	Storm Water (SW)		45 M
SW #4	Storm Water (SW)		45 M
SW #5	Storm Water (SW)		20 M
SW #6	Storm Water (SW)		20 M





## COLUMBIA INSPECTION, INC. U.S. Customs Approved Gaugers

Petroleum And Environmental Laboratory Tank Calibrations

INVOICE

071

RECEIVED

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

DEC 1 8 2000

KOPPERS INDS, INC. PORTLAND OR

INVOICE DATE: 12/15/2000 IN	INVOICE NUMBER: 502270 PAGE: 1						
REPORT DATE:12/14/2000	LABORATORY REPORT NUMBER: 02270						
EPORT DATE:12/14/2000 LABORAT	ORY REPORT NUMBER: 02270						
Client's Project Name: STORM WATER ANALYSIS							
Date Submitted: 12/13/2000							
Lab Number Sample Number Sample Description	n.						
20002270-001 STORM WATER TANK	GRAB SAMPLE						
Analysis of the Water samples.							
O & G TOTAL (HEM)*Quoted 1 @ \$ 39.00	\$ 39.00						
PHENOLS, TOTAL*Quoted 1 @ \$ 35.00	\$ 35.00						
Total:	\$ 74.00 \$ 74.00						
	<u> </u>						
Total Due:	\$ 74.00						

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail:lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 12/13/20

PROJECT NAME: STORM WATER ANALYSIS

CI SAMPLE

CLIENTS ID#

DATE

TIME MATRIX

DESCRIPTION

02270-001 12/13/

12/13/2000 1400 Water

STORM WATER TANK GRAB SAMPLE

**REPORT DATE: 12/14/2000** REPORT NUMBER: 02270 PAGE: 1 OF 1 DETECTION ANALYSIS PARAMETER RESULTS UNITS LIMIT analyst STORM WATER TANK GRAB SAMPLE 02270-001 O & G TOTAL (HEM) Dick R TOTAL OIL AND GREASE 2.2 mg/L EPA 1664 12/14/2000 STORM WATER TANK GRAB SAMPLE 02270-001 PHENOLS, TOTAL TOTAL RECOVERABLE PHENOLICS mg/L 0.05 Jeremy B EPA 420.1 12/14/2000

REVIEWED BY:

Martin Little - Quality Manager

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	inv No.	Date
305	807		9270	925	0362			\$74		
								,	502270	11/15/00
									Vendor Number	
			,						014327008	
				Gross Amour	nt			\$74.00	Terms	Due
	_			Discount					Code	Date
uthorisa	gron .			Net				\$74.00	045	
Sp	•	•						Division	Month	Audit No.
1							- 1	483	. 12	42700120034

P.O. Box 83569 7133 N. LOMBARD PORTLAND, OR 97283

STATEMENT

Nov 30, 2000

**ANY QUESTIONS OR CONCERNS** PLEASE CALL CRAIG AT:

**CUSTOMER NO: 071** 

RECEIVE PHONE: (503) 286-9464

OR

FAX: (503) 285-7831

TO: KOPPERS INDUSTRIES, INC. 7540 NW St. HELENS ROAD

PORTLAND,, OR 97210-3663

DEC 1 4 2000

AMOUNT ENCLOSED

KOPPERS INDS, INC. PORTLAND OR

THANK YOU!

ORDER NO/P.O. No. DATE INVOICE NO. **DUE DATE** AMOUNT 10/12/00 501943 10/27/00 STORM WATER TANKS 291.50 10/31/00 502050 11/15/00 STORM WATER ANALYSIS 39.00 11/29/00 502176 12/14/00 STORM WATER ANALYSIS 74.00

12.15.00 All has been Processed

TOTAL

404.50

CURRENT	0 To 30 Days	30 TO 60 DAYS	VERY OLD!
113.00	291.50	0.00	0.00

THANK YOU FOR DOING BUSINESS WITH CI!!



## COLUMBIA INSPECTION, INC. U.S. Customs Approved Gaugers

U.S. Customs Approved Gaugers
Petroleum And Environmental Laboratory
Tank Calibrations

**INVOICE** 

071

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 11/29/2000

**INVOICE NUMBER: 502176** 

PAGE: 1

INVOICE DATE: 11/29/2000	INVOICE NUMBER: 502	176		PAGE: 1
REPORT DATE:11/28/2000	LABORATORY	REPORT	NUMBER:	02176
PORT DATE:11/28/2000	LABORATORY REPORT NUMBER: 0	2176		
Client's Project Name: STORM WA	ATER ANALYSIS			
Date Submitted: 11/27/2000				
Lab Number Sample Number	Sample Description			
20002176-001	STORM WATER TANK GRAB WATER SAMPLE	-		
Analysis of the Water samples.				
O & G TOTAL (HEM) *Quoted		\$	39.00	,
PHENOLS, TOTAL*Quoted	1 @ \$ 35.00	\$	35.00	
Total:		\$	74.00	\$ 74.00
		E CALL		VED
		N Practice	Col hum K	the form have
		ם	EC - 1 2	000
			ERS INC	IS, ING.
Total Due:		1		\$ 74.00

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 11/27/20

PROJECT NAME: STORM WATER ANALYSIS

CI SAMPLE

CLIENTS ID#

DATE

TIME MATRIX

DESCRIPTION

02176-001 11/27/2000 0900 Water

STORM WATER TANK GRAB WATER SAMPLE

REPORT DA	TE: 11/29/2000	REPORT NUMBER:	02176			PAGE: 1 OF
SAMPLE	ANALYSIS	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	ANALYST
	TANK GRAB WATER SAMPI		- RESULTS			ARADISI
02176-001	O & G TOTAL (HEM) EPA 1664	TOTAL OIL AND GREASE	ND	mg/L	2	Gordon L 11/29/2000
STORM WATER	TANK GRAB WATER SAMPI	LE				<u></u>
02176-001	PHENOLS, TOTAL	TOTAL RECOVERABLE PHENOLICS	ND	mg/L	0.05	Jeremy B
	EPA 420.1					11/28/2000

REVIEWED BY: W

Martin Little - Quality Manager

Vendor Name Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	lńv No.	Date
305	807		9270	925	0362			\$74		
									502176	11/29/00
·								•		
									Vendor Number	
									014327008	
	<u> </u>									<del> </del>
				Gross Amour	nt			\$74.00	Terms	Due
	2			Discount					Code	Date
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Min	<u></u>							Division	Month	Audit No.
"		<del>-</del>						483	12	92700120005

P.O. Box 83569 7133 N. Lombard Portland, OR 97283

STATEMENT

OCT 31, 2000

CUSTOMER NO: 071

Any Questions or Concerns
Please call Craig at:

PHONE: (503) 286-9464

OR

FAX: (503) 285-7831

TO: KOPPERS INDUSTRIES, INC. 7540 NW St. HELENS ROAD PORTLAND., OR 97210-3663

AMOUNT ENCLOSED

\$

THANK YOU!

DATE INVOICE NO. **DUE DATE** ORDER NO/P.O. No. AMOUNT 9/14/00 501772 9/29/00 291.50 10/12/00 501943 10/27/00 STORM WATER TANKS 291.50 10/31/00 502050 11/15/00 STORM WATER ANALYSIS 39.00

All has

NOV 1 3 2000

KUPPENS HOW, ING.

**TOTAL** 

622.00

CURRENT	0 To 30 Days	30 TO 60 DAYS	VERY OLD !
330.50	291.50	0.00	0.00

THANK YOU FOR DOING BUSINESS WITH CI!!



U.S. Customs Approved Gaugers
Petroleum And Environmental Laboratory
Tank Calibrations

INVOICE

RECEIVED

071

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

NOV - 2 2000

KOPPERS INDS, INC. PORTLAND OR

INVOICE DATE: 10/31/2000

**INVOICE NUMBER: 502050** 

PAGE: 1

HIVOICE DATE: 10/31/2000	1144010	140141	DLIC. JUZ	2020			I 1 1 CD.	<u> </u>
REPORT DATE:10/31/2000		LABO	DRATORY	RE	PORT	NUMBER:	02050	)
EPORT DATE:10/31/2000 LAI	BORATORY	REPORT	NUMBER:	0205	0			
Client's Project Name: STORM WATER ANALYSIS				}		:	<u> </u> 	
CITER S FIOJECT Name. STORM WAILE ANALISIS				1			}	
Date Submitted: 10/30/2000				- {				
Gamala Daganiahian GMODW WAMED MANY GDAY	D 6334578						ļ	
Sample Description: STORM WATER TANK GRAI	B SAMPLE							
				1				
Analysis of the Water Sample.				-			ĺ	
Analysis of the water sample.				1			1	
O & G TOTAL (HEM)Quoted 1 @ \$ 39	.00			- [	\$	39.00		
Total:				+	\$	39.00	\$	39.00
Total.				1	*			00.00
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				1				
Total Due:				- 1			\$	39.00

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current, schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 10/30/20

PROJECT NAME: STORM WATER ANALYSIS

CI	Sample	CLIENTS ID#	DATE	TIME	MATRIX	DESCRIPTION

02050-001	10/30/2000	1200	Water	STORM WATER T	tank grai	B SAMPLE

MUSUKI DI	14. IU/31/2000	WELCHT HOMBEY. O	2030			E /KGID . I	V2	-
					DETECTION			_
SAMPLE	ANALYSIS	PARAMETER	RESULTS	UNITS	LIMIT	analyst		
STORM WATE	TANK GRAB SAMPLE							

02050-001 O & G TOTAL (HEM) TOTAL OIL AND GREASE EPA 1664

mg/L

2.7

Gordon L 10/30/2000

REVIEWED BY:

Martin Little -Quality Manager Vendor Name Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362			\$39		
									502050	10/31/00
									Vendor Number	
									014327008	
							-			
		-		Gross Amour	nt			\$39.00	Terms	Due
				Discount					Code	Date
thoria	tion			Net				\$39.00	045	
Man	· 							Division	Month	Audit No.
Min		-		•			}	483	- 11	92700110007



U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

071

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

RECEIVED

OCT 1 3 2000

KOPPERS INDS, INC. PORTLAND OR PAGE: 1

INVOICE DATE: 10/12/2000

**INVOICE NUMBER: 501943** 

22 20 20 20 20 20 20 20 20 20 20 20 20 2				01040
REPORT DATE:10/11/2000	LABORATORY		r number:	01943
PORT DATE:10/11/2000	LABORATORY REPORT NUMBER: 0	1943		
Client's Project Name: STORM W	ATER TANKS			
-				
Date Submitted: 10/10/2000				
Lab Number Sample Number	Sample Description			
20001943-001	STORM WATER TANK WATER GRAB SAMPLE	-		
Analysis of the Water samples.				
O & G TOTAL (HEM)*Quoted.	1 @ \$ 39.00	ş	39.00	
PHENOLS, TOTAL*Quoted	1 @ \$ 35.00	\$	35.00	
PNAH 2*Quoted.	1 @ \$ 145.00	\$	145.00	
Total:		\$	219.00	\$ 219.00
* Rush Fee		ş	72.50	\$ 72.50
· .	•			
		- [		
otal Due:				\$ 291.50

OLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone:(503) 286-9464 Fax:(503) 286-5355 E-mail:lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection

Vendor	Name	Columbia	Inspecti	on						
G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362	<u> </u>		\$292		-
									501943	10/12/00
		ļ								
									Vendor Number	
									014327008	]
				Gross Amour	it			\$291.50	Terms	Due
				Discount					Code	Date
uthorize	ion			Net				\$291.50	045	
Son								Division	/ Month	Audit No.
				•				483	10	92700100018

1 1



7

## COLUMBIA INSPECTION, INC.

## U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

071

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 09/14/2000

**INVOICE NUMBER: 501772** 

PAGE: 1

EPORT DATE:09/14/2000	LABORATOR		'NUMBER:	01772
RT DATE:09/14/2000	LABORATORY REPORT NUMBER:	01772		-
Client's Project Name: STORM W	NATER ANALYSIS		-	
Date Submitted: 09/12/2000		-		
Lab Number Sample Number	Sample Description	1		
20001772-001	STORM WATER TANK GRAB WATER SAMPLE			
Analysis of the Water samples.				
O & G TOTAL (HEM)*Quoted.		\$	39.00	
PHENOLS, TOTAL*Quoted. PNAH 2*Quoted.		\$ s	35.00 145.00	
rivan 2 · · · · · · · · · · · · · · · · · ·	1 6 2 143.00	'	145.00	
Total:		\$	219.00	\$ 219.00
* Rush Fee	•••	ş	72.50	\$ 72.50
RECEIVE				
SEP 1 8 2000		1.		
KOPPERS INDS, IN	0			
PORTLAND OR	ORIGINAL			
al Due:		1		\$ 291.50

All work performed is subject to the terms and conditions of our current, schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail:lab@ColumbiaInspection.com

Vendor Name Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	inv No.	Date
305	807	*	9270	925	0362			\$292		
									501772	9/14/00
						<u> </u>				
	<u> </u>								Vendor Number	n
								¥.	014327008	
	1	1		Gross Amour	nt	<u></u>		\$291.50	Terms	Due
	_			Discount					Code	Date
uthoriza	non			Net				\$291.50	045	
Ma		<del></del>						Division	Month	Audit No.
		<u>-</u> -					ļ	483	9	Audit No. <b>9270009002</b> (4

Columbia Inspection, Inc. P.O. Box 83569
Portland,, OR 97283
U.S.A.

**Statement** 

Statement Date: Jul 14, 2000

Customer Account ID:

071

**Phone**: 503-286-9464 **Fax**: 503-285-7831

Koppers Industries, Inc.

7540 NW St. Helens Road

Account Of: Portland,, OR 97210-3663

Amount Enclosed

Date	Due Date	Invoice No.	Puchase Orde	er No.	Amount	]	Paid	Balaı	
5/15/00	5/30/00	500927 check	# 393364	sent	7.05.00	39.00			39.00
5/31/00	6/15/00	501031 <b>check</b> FC5VU00018	# 394608	sent.	7.18.00	39.00			78.00
5/31/00	5/31/00	FC5VU00018	Late Char	ge <b>L D</b>	onot pay	5.00	ļ		83.00
6/16/00	7/1/00	501164 > ent	ered		late changes	74.00			157.00
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						PURI	LAND	PR	
<u> </u>	<u> </u>		·			т	otal		157.00
						1	uldi		131.00

0-30	31-60	61-90	Over 90 days
74.00	83.00	0.00	0.00

Thank You for Choosing Columbia Inspection



# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 06/16/2000 **INVOICE NUMBER: 501164** PAGE: 1 REPORT DATE: 06/14/2000 LABORATORY REPORT NUMBER: 01164 Client's Project Name: MONTHLY STORM WATER ANALYSIS Date Submitted: 06/13/2000 Lab Number Sample Number Sample Description 20001164-001 STORM WATER TANK GRAB SAMPLE Analysis of the Water samples. 39.00 O & G TOTAL (HEM).....Quoted.... 1 @ \$ 39.00 35.00 PHENOLS, TOTAL.....Quoted.... 1 @ \$ 35.00 Total: 74.00 74.00 RECEIVED JUN 1 9 2000 KOPPERS INDS, NC. PORTLAND OR Total Due: 74.00

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: TOSCO CORPORATION - PHOENIX

1500 N. PRIEST DRIVE

**TEMPE AZ 85281** 

PHONE: (602) 728-7934

FAX: (602) 728-7983

DATE SUBMITTED: 06/13/20

PROJECT NAME: PIPELINE TRANSFER

CI SAMPLE	CLIENTS ID#	DATE	TIME	MATRIX	DESCRIPTION
01154-001		06/13/2000	1020	Oil	TANK 4318 ROSE BLEND UPPER SAMPLE
01154-002		06/13/2000	1022	Oil	TANK 4318 ROSE BLEND MIDDLE SAMPLE
01154-003		06/13/2000	1024	Oil	TANK 4318 ROSE BLEND LOWER SAMPLE
01154-004		06/13/2000		Oil	TANK 4318 ROSE BLEND COMPOSITE SAMPLE

REPORT DA	ATE: 06/15/2000	REPORT NUMBER:	01154			PAGE: 1 OF
					DETECTION	
SAMPLE	ANALYSIS	PARAMETER	RESULTS	UNITS	LIMIT	ANALYST
TANK 4318 R	OSE BLEND UPPER SAMPLE					
01154-001	API GRAVITY	API CORRECTED TO 60 F	13.9	DEG. API		Gordon L
	ASTM D-1298					06/13/2000
TANK 4318 R	OSE BLEND MIDDLE SAMPLE	E				
01154-002	API GRAVITY	API CORRECTED TO 60 F	13.7	DEG. API		Gordon L
	ASTM D-1298					06/13/2000
TANK 4318 R	OSE BLEND LOWER SAMPLE		·····	<del></del>		
01154-003	API GRAVITY	API CORRECTED TO 60 F	13.9	DEG. API		Gordon L
	ASTM D-1298					06/13/2000
TANK 4318 R	OSE BLEND COMPOSITE SAI	MPLE	· <del></del>			
01154-004	API GRAVITY	API CORRECTED TO 60 F	13.8	DEG. API		Gordon L
	ASTM D-1298					06/13/2000
	BS&W	SUM OF SEDIMENT AND WATER	ND	VOL %	0.05	Gordon L
	ASTM D-1796					06/13/2000
	CCR	CONRADSON CARBON RESIDUE	12.7	WT %	0.01	Gordon L
	ASTM D-189					06/13/2000
	FLASH POINT - PMCC	FLASH POINT	172	DEG F		Gordon L
	ASTM D-93					06/13/2000
	POUR POINT, F	POUR POINT	12	DEG. F		Gordon L
	ASTM D-97					06/13/2000
	SULFUR, X-RAY	SULFUR	2.08	WT %	0.01	Tony W
	ASTM D-4294					06/14/2000

REVIEWED BY: W/M

Martin Little - Quality Manager

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362			\$74		
									501164	6/16/00
			<u> </u>		·	·		·		
									Vendor Number	
	<u> </u>								014327008	
									·	
				Gross Amour	ıt			\$74.00	Terms	Due
				Discount					Code	Date
Auth <u>oriza</u>	tion			Net				\$74.00	045	
Km	<u> </u>		-					Division	Month	Audit No.
		-					l.	483	6	9270000031



# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 03/24/2000 PAGE: 1 **INVOICE NUMBER: 500532** REPORT DATE: 03/21/2000 LABORATORY REPORT NUMBER: 0532 Client's Project Name: Date Submitted: 03/20/2000 Sample Description: WASTE WATER GRAB SAMPLE Analysis of the Water Sample. O & G TOTAL (HEM) \*.....Quoted.... 1 @ \$ 39.00 39.00 39.00 39.00 Total: 39.00 39.00 \* Rush Fee..... still owe RECEIVE MAR 2 7 2000 KOPPERS INDS. INC PORTLAND OF Total Due:

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection

Vendor Name

Columbia Inspection

G/L_	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	inv No.	Date
305	807		9270	925	0362			\$39		
									500532 <b>÷2</b>	3/24/00
`							·		Vendor Number	
		· .							014327008	
	<u> </u>	li		Gross Amoun	ıt			\$39.00	Terms	Due
				Discount					Code	Date
uthor	Ron	•		Net				\$39.00	045	
Jh.			-					Division	Month	Audit No.
							1	483	6	92700060029

Columbia Inspection, Inc. P.O. Box 83569 Portland, OR 97283 U.S.A.

Statement

Statement Date: May 31, 2000

**Customer Account ID:** 

071

**Phone**: 503-286-9464 **Fax**: 503-285-7831

Koppers Industries, Inc.

7540 NW St. Helens Road

Account Of: Portland,, OR 97210-3663

Amount Enclosed

						· _
Date	Due Date	Invoice No.	Puchase Order No.	Amount	Paid	Balance
3/24/00	4/8/00	500532			(Part)	39.00
4/17/00	5/2/00	500723		538.0	0	577.00
4/28/00	5/13/00	500807		39.0	0	616.00
5/8/00	5/23/00	500871		74.0	O Para	sebsed 690.00
5/15/00	5/30/00	500927		39.0		, 19.00 729.00
5/31/00	6/15/00	501031		39.0	0	768.00
5/31/00	5/31/00	FC5VU00018	Late Charge	5.0	0	773.00
					EIV	ED
				Jur	1 6 2000	
					RS INDS, TLAND O	
		1	1		Total	773.00

0-30	31-60	61-90	Over 90 days
157.00	577.00	39_00	0.00

Thank You for Choosing Columbia Inspection



# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 05/31/2000 PAGE: 1 **INVOICE NUMBER: 501031** REPORT DATE: 05/25/2000 LABORATORY REPORT NUMBER: 01031 Client's Project Name: STORM WATER TANKS Date Submitted: 05/24/2000 Sample Description: STORM WATER TANK GRAB SAMPLE Analysis of the Water Sample. O & G TOTAL (HEM) .....Quoted .... 1 @ \$ 39.00 39.00 Total: 39.00 39.00 RECEIVED JUN - 1 2000 KOPPERS INDS INC. PORTLAND OR 39.00

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@Columbiainspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

DATE SUBMITTED: 05/24/20

PROJECT NAME: STORM WATER TANKS

CI SAMPLE

01031-001

01031-001

CLIENTS ID#

DATE

TIME MATRIX

r

DESCRIPTION

05/24/2000 1100 Water

PARAMETER

REPORT NUMBER: 01031

PAGE: 1 OF 1

\_\_\_\_\_

UNITS

PHONE: (503) 286-3681

FAX: (503) 285-2831

DETECTION

LIMIT

2

ANALYST

STORM WATER TANK GRAB SAMPLE

REPORT DATE: 05/31/2000

O & G TOTAL (HEM)

ANALYSIS

EPA 1664

TOTAL OIL AND GREASE

ND

RESULTS

mg/L

Gordon L 05/25/2000

REVIEWED BY:

Martin Little - Quality Manager

Vendor Name Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362			\$39		
			•						501031	5/31/00
_					(				Vendor Number	
									014327008	
				Gross Amour	nt .			\$39.00	Terms	Due.
	1			Discount					Code	Date
uthoria	tion			Net				\$39.00	045.	
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# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 05/15/2000

**INVOICE NUMBER: 500927** 

PAGE: 1

REPORT DATE:05/11/2000	LABORATORY	REPORT	NUMBER:	00927
Client's Project Name: STORM WATER TANKS				·
Date Submitted: 05/10/2000				
Sample Description: STORM WATER GRAB SAMPLE				
Analysis of the Water Sample.				
O & G TOTAL (HEM)Quoted 1 @ \$ 39.00		\$	39.00	
Total:		\$	39.00	\$ 39.00
			:	
•				
otal Due:				\$ 39.00
	RECEIV			
	MAY 1 6 200	00		
	KOPPERS INDS	i, INC. OR		

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail:lab@ColumbiaInspection.com

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CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 05/10/20

PROJECT NAME: STORM WATER TANKS

CI SAMPLE

CLIENTS ID#

DATE

TIME MATRIX

DESCRIPTION

00927-001

05/10/2000 1200 Water

STORM WATER GRAB SAMPLE

REPORT DATE: 05/12/2000 PAGE: 1 OF 1 REPORT NUMBER: 00927 DETECTION analysis RESULTS LIMIT PARAMETER UNITS analyst STORM WATER GRAB SAMPLE 00927-001 O & G TOTAL (HEM) TOTAL OIL AND GREASE 5.1 mg/L Gordon L. EPA 1664

REVIEWED BY:

- Quality Manager

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362			\$39		
									500927	5/15/00
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									014327008	
	1	<u> </u>		Gross Amour	nt	l		\$39.00	Terms	Due
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# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

INVOICE

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

PAGE: 1 INVOICE DATE: 05/08/2000 **INVOICE NUMBER: 500871** REPORT DATE: 05/05/2000 LABORATORY REPORT NUMBER: 00871 Client's Project Name: MONTHLY DISCHARGE REPORT Date Submitted: 05/04/2000 Sample Number Sample Description 20000871-001 STORM WATER TANK GRAB SAMPLE Analysis of the Water samples. O & G TOTAL (HEM).....Quoted.... 1 @ \$ 39.00 39.00 PHENOLS, TOTAL\*.....Quoted.... 1 @ \$ 35.00 35.00 Total: 74.00 74.00 Total Due: 74.00 RECEIVE MAY - 9 2000 KOPPERS INDS, INC PORTLAND OR

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail:lab@ColumbiaInspection.com

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Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 05/04/20

PROJECT NAME: MONTHLY DISCHARGE REPORT

CI SAMPLE

CLIENTS ID#

DATE

TIME MATRIX

DESCRIPTION

00871-001

05/

05/04/2000 0800 Water

STORM WATER TANK GRAB SAMPLE

REPORT DATE: 05/05/2000 REPORT NUMBER: 00871 PAGE: 1 OF 1

14. 03/03/2000	REPORT NORDER.	PAGE: I OF A			
				DETECTION	
analysis	Parameter	results	UNITS	LIMIT	analyst
TANK GRAB SAMPLE					· · · · · · · · · · · · · · · · · · ·
PHENOLS, TOTAL EPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.54	PPM	0.05	Dick R.
O & G TOTAL (HEM) EPA 1664	TOTAL OIL AND GREASE	2.3	mg/L	2	Gordon L.
	ANALYSIS TANK GRAB SAMPLE PHENOLS, TOTAL EPA 420.1 O & G TOTAL (HEM)	ANALYSIS PARAMETER  TANK GRAB SAMPLE  PHENOLS, TOTAL TOTAL RECOVERABLE PHENOLICS EPA 420.1  O & G TOTAL (HEM) TOTAL OIL AND GREASE	ANALYSIS PARAMETER RESULTS  TANK GRAB SAMPLE  PHENOLS, TOTAL TOTAL RECOVERABLE PHENOLICS 0.54  EPA 420.1  O & G TOTAL (HEM) TOTAL OIL AND GREASE 2.3	ANALYSIS PARAMETER RESULTS UNITS  TANK GRAB SAMPLE  PHENOLS, TOTAL TOTAL RECOVERABLE PHENOLICS 0.54 PPM  EPA 420.1  O & G TOTAL (HEM) TOTAL OIL AND GREASE 2.3 mg/L	ANALYSIS PARAMETER RESULTS UNITS LIMIT  TANK GRAB SAMPLE  PHENOLS, TOTAL TOTAL RECOVERABLE PHENOLICS 0.54 PPM 0.05  EPA 420.1  O & G TOTAL (HEM) TOTAL OIL AND GREASE 2.3 mg/L 2

REVIEWED BY:

Martin Little - Quality Manager

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362			\$74		
									500871	5/8/00
									Vendor Number	
									014327008	
		ł		Gross Amour	nt	l		\$74.00	Terms	Due ·
				Discount					Code	Date
Authoria	tion			Net				\$74.00	045	,92700050015
Min		=						Division	Month	Audit No.
//								483	5	<u></u>

Columbia Inspection, Inc. P.O. Box 83569 Portland, OR 97283 U.S.A.

Statement

Statement Date: May 3, 2000

**Customer Account ID:** 

071

Phone: Fax: 503-286-9464 503-285-7831

Account Of: Koppers Industries, Inc.

7540 NW St. Helens Road Portland,, OR 97210-3663

Amount Enclosed

Date	Due Date	Reference	Description	Amount	Balance	
3/20/00	4/4/00	500479		39.00	39.00	
3/24/00	4/8/00	500532		78.00	117.00	1
4/4/00	4/19/00	500599		39.00	156.00	
4/17/00	5/2/00	500723		538.00	694.00	
4/28/00	5/13/00	500807		39.00	733.00	
					All ho	s been
				REC	EIVED	
				MAY	- 8 2000	
					INDS, INC.	
				FUNIL	AND OR	
				Tota	l 73	3.00

0-30	31-60	61-90	Over 90 days
616.00	117.00	0.00	0.00

Please attend to this payment as soon as possible.



# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

RECEIVED

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

MAY - 1 2000

KOPPERS INDS, INC. PORTLANDOR

INVOICE DATE: 04/28/2000

**INVOICE NUMBER: 500807** 

NUMBER: 500807 PAGE 11
LABORATORY REPORT NUMBER: 00807

REPORT DATE:04/26/2000 LABORATORY	REPORT	NUMBER:	00807
Client's Project Name: STORM WATER TANKS			
Date Submitted: 04/26/2000		ļ	
Sample Description: STORM WATER TANK GRAB WATER SAMPLE			
Analysis of the Water Sample.			
O & G TOTAL (HEM)*Quoted 1 @ \$ 39.00	ş	39.00	
Total:	ş	39.00	\$ 39.00
otal Due:			\$ 39.00

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: tab@ColumbiaInspection.com

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Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 04/26/20

PROJECT NAME: STORM WATER TANKS

CI SAMPLE CLIENTS ID DATE TIME MATRIX DESCRIPTION

00807-001 04/26/2000 1100 Water STORM WATER TANK GRAB WATER SAMPLE

REPORT DATE: 04/28/2000 REPORT NUMBER: 00807 PAGE: 1 OF 1
DETECTION

SAMPLE AWALYSIS PARAMETER RESULTS UNITS LIMIT AWALYST
STORM WATER TANK GRAR WATER SAMPLE

STORM WATER TANK GRAB WATER SAMPLE

00807-001 O & G TOTAL (HEM) TOTAL OIL AND GREASE ND mg/L 2 Gordon L.
EPA 1664

REVIEWED BY

Martin Little - Quality Manager

Vendor Name

Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362			\$39		
									500807	4/28/00
									Vendor Number	
									014327008	
				Gross Amour	nt			\$39.00	Terms	Due
	1			Discount					Code	Date
Authorita	ion			Net				\$39.00	045	·
MA			-					Division	Month	Audit No.
								483	5	92700050001



# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 04/17/2000 **INVOICE NUMBER: 500723** PAGE: 1 REPORT DATE: 04/15/2000 LABORATORY REPORT NUMBER: 00723 Client's Project Name: Date Submitted: 04/13/2000 Lab Number Sample Number Sample Description 20000723-001 WASTE WATER GRAB SAMPLE Analysis of the Water samples. O & G TOTAL (HEM) \*.....Quoted.... 1 @ \$ 39.00 39.00 PHENOLS, TOTAL\*.....Quoted.... 1 @ \$ 35.00 35.00 PNAH 1\*..... 1 @ \$ 195.00 195.00 Total: 269.00 269.00 \* Rush Fee..... 269.00 269.00 Total Due: 538.00 RECEIVED APR 1 9 2000 KOPPERS INDS. INC. PORTLAND OR

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



#### CERTIFICATE OF ANALYSIS TO ALL

CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 04/13/20

PROJECT NAME: WW TKS

CI SAMPLE CLIENTS ID# DATE

TIME MATRIX DESCRIPTION

0723-001 WASTE WATER GRAB SAMPLE 04/13/2000 1000 Water

REPORT DATE: 04/17/2000 REPORT NUMBER: 0723 PAGE: 1 OF 1 DETECTION SAMPLE ANALYSIS PARAMETER RESULT UNIT LIMIT ANALYST WASTE WATER GRAB SAMPLE 0723-001 O & G TOTAL (HEM) TOTAL OIL AND GREASE 3.4 mg/L Gordon L. EPA 1664 PNAH 1 ACENAPHTHENE 0.0040 mg/L 0.00005 Jacob F. EPA 625 ACENAPHTHYLENE 0.0017 0.00005 mg/L ANTHRACENE 0.0014 mg/L 0.00005 BENZO (A) ANTHRACENE 0.0057 0.00005 mg/L BENZO (A) PYRENE 0.0079 0.0002 mg/L 0.0072 0.0002 BENZO (B) FLUORANTHENE mg/L BENZO (GHI) PERYLENE 0.0058 mg/L 0.0005 BENZO (K) FLUORANTHENE 0.0064 mg/L 0.0002 CHRYSENE 0.0070 0.00005 mg/L DIBENZO (AH) ANTHRACENE 0.0023 mg/L 0.0003 FLUORANTHENE 0.0097 0.00005 mg/L FLUORENE 0.0023 0.00005 mg/L INDENO(1,2,3-CD)PYRENE 0.0052 0.0004 mg/L NAPHTHALENE 0.013 mg/L 0.00005 PHENANTHRENE 0.0039 mg/L 0.00005 PYRENE 0.0084 0.00005 mg/L SURROGATE 106% %RECOVERY 50%-150% PHENOLS, TOTAL TOTAL RECOVERABLE PHENOLICS 0.05 Abby K. mg/L EPA 420.1

REVIEWED BY:

- Quality Manager

Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date_
305	807		9270	925	0362			\$538		•
		<u> </u>				-		·	500723	4/17/00
									Vendor Number	
					<del>-</del>				014327008	
	<u> </u>	<u> </u>		Gross Amoun	nt			\$538.00	Terms	Due
				Discount					Code	Date
thorize	Mon			Net				\$538.00	045	
A.			_					Division	Month	Audit No.
7				•				483	4	Audit No. 9270004003



# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 04/04/2000 PORT DATE: 03/29/2000	LABORATORY	REPORT	NUMBER:	00599	1
Client's Project Name: WW TKS					
Date Submitted: 03/28/2000					
Sample Description: WASTE WATER GRAB SAM	MPLE				
Analysis of the Water Sample.					
O & G TOTAL (HEM)Quoted 1 @ \$ 3	9.00	\$	39.00		
Total:		\$	39.00	\$	39.00
cal Due:				\$	39.00
	_				
	RECEIVE	Ф			
	APR 06 2000				
	KOPPERS INDS, INC PORTLAND OR				

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 03/28/20

PROJECT NAME: WW TKS

EPA 1664

more commendate that the territory of the contract of the series

CI SAMPLE CLIENTS ID# DATE TIME MATRIX DESCRIPTION

0599-001 03/28/2000 1500 Water WASTE WATER GRAB SAMPLE

REPORT DATE: 04/03/2000 REPORT NUMBER: 0599 PAGE: 1 OF 1

SAMPLE ANALYSIS PARAMETER RESULT UNIT LIMIT ANALYST
WASTE WATER GRAB SAMPLE

0599-001 O & G TOTAL (HEM) TOTAL OIL AND GREASE 2.1 mg/L 2 Gordon L.

REVIEWED BY: O

Vendor Name Columbia Inspection

Date	inv No.	Amount	Move No./ PO No.	Emp No.	Tax	Department	Location	Subdetail	Detail	G/L
		\$39			0362	925	9270		807	305
4/4/00	500599									
	Vendor Number									
	014327008									
Due	Terms	\$39.00			nt	Gross Amour				
Date	Code					Discount			1	
	045	\$39.00				Net			tion	utho <del>riza</del>
Audit No.	Month	Division								Her-
9270004001	4	483	1					•		

Columbia Inspection, Inc. P.O. Box 83569
Portland,, OR 97283
U.S.A.

Statement

Statement Date: Mar 31, 2000

Phone: Fax:

503-286-9464 503-285-7831

071

Customer Account ID:

RECEIVED

Account Of: Koppers Industries, Inc. 7540 NW St. Helens Road

7540 NW St. Helens Road Portland, OR 97210-3663

APR 07 2000

KOPPERS INDS, INC. PORTLAND OR

Amount Enclosed

Date	Due Date	Reference	Description	Amount	Balance
12/31/99			Balance Fwd		343.00
1/3/00		376274	Payment	-74.00	269.00
1/11/00	1/26/00	500006		291.50	560.50
1/13/00	1/28/00	500059		39.00	599.50
1/15/00		377619	Payment	-39.00	560.50
1/24/00		378210	Payment	-39.00	521.50
1/26/00	2/10/00	500153		39.00	560.50
1/31/00		378980	Payment	-74.00	486.50
2/4/00		379645	Payment	-78.00	408.50
2/4/00	2/19/00	500192		85.00	493.50
2/14/00	2/29/00	500242		39.00	532.50
2/21/00	3/7/00	500296		39.00	571.50
2/25/00	3/11/00	500338		39.00	610.50
3/3/00		382329	Payment	-330.50	280.00
3/3/00	3/18/00	500385	w w tks	74.00	354.00
3/20/00	4/4/00	590479		39.00	393.00
3/20/00	4/4/00	500479		39.00	432.00
3/20/00		383576	Payment	-39.00	393.00
3/24/00	4/8/00	500532		78.00	471.00
3/27/00		384178	Payment	-85.00	386.00
			1		
	-				
	<u> </u>	1			

**Total** 386.00

0-30	31-60	61-90	Over 90 days
230.00	117.00	0.00	39.00

4-10.00 Spoke to

Conniedo not owe this



## U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 03/24/2000 PAGE: 1 **INVOICE NUMBER: 500532** REPORT DATE: 03/21/2000 LABORATORY REPORT NUMBER: 0532 Client's Project Name: Date Submitted: 03/20/2000 Sample Description: WASTE WATER GRAB SAMPLE Analysis of the Water Sample. O & G TOTAL (HEM) \*.....Quoted.... 1 @ \$ 39.00 39.00 39.00 Total: 39.00 39.00 \* Rush Fee..... 39.00 RECEIVED MAR 2 7 2000 KOPPERS INDS, INC PORTLAND OR

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Total Due:

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 03/20/20

PROJECT NAME: WW TKS

EPA 1664

CI SAMPLE CLIENTS ID# DATE TIME MATRIX DESCRIPTION

0532-001 03/20/2000 0830 Water WASTE WATER GRAB SAMPLE

REPORT DATE: 03/24/2000 REPORT NUMBER: 0532 PAGE: 1 OF 1

SAMPLE ANALYSIS PARAMETER RESULT UNIT LIMIT ANALYST
WASTE WATER GRAB SAMPLE

0532-001 O & G TOTAL (HEM) TOTAL OIL AND GREASE 4.9 mg/L 2 Gordon L.

REVIEWED BY:

Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	inv No.	Date
305	807		9270	925	0362			\$39		
						<u> </u>			500532	3/24/00
									Vendor Number	·
									014327008	
<i>.</i>	L	<u> </u>	<u></u>	Gross Amour		<u> </u>		\$39.00	Terms	Due
				Discount	16			\$39.00	Code	Date
uthoriza	tion			Net				\$39.00	045	
Ju								Division	Month	Audit No. 4270003004
		_					1	483	3	4270003004

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## U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

PAGE: 1 INVOICE DATE: 03/20/2000 **INVOICE NUMBER: 500479** REPORT DATE: 03/14/2000 LABORATORY REPORT NUMBER: 0479 Client's Project Name: Date Submitted: 03/13/2000 Sample Description: WW TKS Analysis of the Water Sample. O & G TOTAL (HEM).....Quoted.... 1 @ \$ 39.00 39.00 Total: 39.00 39.00 RECEIVED MAR 2 2 2000 KOPPERS INDS, INC. PORTLAND OR Total Due:

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

DATE SUBMITTED: 03/13/20

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE

CLIENTS ID#

DATE

TIME MATRIX

DESCRIPTION

PHONE: (503) 286-3681

FAX: (503) 285-2831

0479-001

03/13/2000

1100 Water

WW TKS

REPORT DATE: 03/16/2000 REPORT NUMBER: 0479 PAGE: 1 OF 1 DETECTION Sample ANALYSIS PARAMETER RESULT UNIT LIMIT ANALYST WW TKS 0479-001 O & G TOTAL (HEM) TOTAL OIL AND GREASE ND mg/L Gordon L. EPA 1664

REVIEWED BY:

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	inv No.	Date
305	807		9270	925	0362			\$39		
									500479	3/20/00
									Vendor Number	
									014327008	
		<u></u>	<u> </u>	Gross Amour			<u> </u>	\$39.00	Terms	. Due
	1			Discount					Code	Date
uthorica	ion			Net				\$39.00	045	
X/h			_					Division	Month	Audit No.
//_								483	3	9270003004
			· ·					-		571 P

Columbia Inspection, Inc. P.O. Box 83569
Portland,, OR 97283
U.S.A.

Voice: Fax: 503-286-9464 503-285-7831

Account Of: Koppers Industries, Inc.

7540 NW St. Helens Road Portland,, OR 97210-3663

#### Statement

Statement Date: Mar 3, 2000

Customer Account ID:



HAVING TO REMIND YOU! Amount Enclosed \$

Date	Due Date	Reference	Paid	Description	Amount	Balance
12/17/99 1/26/00	1/1/00 2/10/00	592461 <b>This</b> 500153	was pai	1	39.00 39.00	39.00 78.00
2/4/00	2/19/00	500192		379645	85.00	163.00
2/14/00 2/21/00	2/29/00 3/7/00	500242 <b>Y</b> 500296 <b>Y</b>		2.1.00	39.00	202.00 241.00
2/25/00	3/11/00	500338	Ì	spoke to Connie	<b>e</b> cr 39.00	280.00
				on 3.12.00		
		V= has been	proce	ssed		
				AT		
				RECEIVE	D	
				MAR - 8 2000		
				KOPPERS INDS, IN PORTLAND OR	IC.	
L			L		Total	280.00

0-30	31-60	61-90	Over 90 days
202.00	39.00	39.00	0.00





# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 03/03/2000	INVOICE NUMBER: 500	385		PAGE:	1
REPORT DATE:03/01/2000	LABORATORY	REPORT	NUMBER:	0385	
Client's Project Name:					
Date Submitted: 02/29/2000					•
Sample Description: W W TKS					
Analysis of the Water Sample.					
O & G TOTAL (HEM)Quoted 1 @ PHENOLS, TOTALQuoted 1 @	• •	\$	39.00 35.00		
rninous, TotalQuoted 1 @	9 \$ 35.00	,	35.00	_	
Total:		\$	74.00	\$	74.00
	Paris, Derror				
otal Due:	RECEIVED			\$	74.00
	MAR - 6 2000				
1	KOPPERS INDO				
	KOPPERS INDS, INC. PORTLAND OR				

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 02/29/20

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE CLIENTS ID# DATE

DATE TIME MATRIX DESCRIPTION

0385-001 02/29/2000 1100 Water W W TKS

REPORT DATE: 03/03/2000 REPORT NUMBER: 0385 PAGE: 1 OF 1 DETECTION SAMPLE ANALYSIS PARAMETER RESULT UNIT LIMIT analyst W W TKS 0385-001 O & G TOTAL (HEM) TOTAL OIL AND GREASE 4.5 mg/L Dick R. EPA 1664 PHENOLS, TOTAL TOTAL RECOVERABLE PHENOLICS mg/L 0.05 Dick R. EPA 420.1

REVIEWED BY: (N

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date_
305	807		9270	925	0362			\$74		
									500385	3/3/00
,					·				Vendor Number	
									014327008	
				Gross Amoun	ıt			\$74.00	Terms	Due
				Discount					Code	Date
Authoriz	Hon			Net				\$74.00	045	
ffir								Division	Month	Audit No.
			_				,	483	3	92700030014



## U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

Client's Project Name: WASTE WATED ANDIVES		
REPORT DATE:02/23/2000	LABORATORY REPORT	NUMBER:
INVOICE DATE: 02/25/2000	INVOICE NUMBER: 500338	P
PORTLAND, OR 9/210-3003		

Analysis of the Water Sample.

Date Submitted:

Sample Description:

O & G TOTAL (HEM) \*.....Quoted.... 1 @ \$ 39.00

02/22/2000

WW TKS

Total:

Total Due:

PAGE: 1 R: 0338

RECEIVED

39.00

39.00

39.00

39.00

FEB **\$** 8 2000

KOPPERS INDS, INC. PORTLAND OR

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 02/22/20

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE CLIENTS ID# DATE TIME MATRIX DESCRIPTION

0338-001 02/22/2000 0800 Water WW TKS

**REPORT DATE: 02/23/2000** REPORT NUMBER: 0338 PAGE: 1 OF 1

DETECTION SAMPLE ANALYSIS RESULT INIT LIMIT ANALYST PARAMETER WW TKS 0338-001 2 Gordon L. O & G TOTAL (HEM) TOTAL OIL AND GREASE ND mg/L EPA 1664

REVIEWED BY:

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362			\$39	·	
									500338	2/25/00
									Vendor Number	
									014327008	
	<u> </u>	<u> </u>								
				Gross Amour	nt			\$39.00	Terms	Due
				Discount			·		Code	Date
thoriza	iig (			Net				\$39.00	045	
In	m-	-		-				Division	Month	Audit No. 427000264
		_						483	2	427000260



#### U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

PAGE: 1

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 02/18/2000 **INVOICE NUMBER: 500296** REPORT DATE: 02/17/2000 LABORATORY REPORT NUMBER: 0296 Client's Project Name: WASTE WATER ANALYSIS Date Submitted: 02/15/2000 Sample Description: WW TKS Analysis of the Water Sample. 39.00 O & G TOTAL (HEM).....Quoted.... 1 @ \$ 39.00 Total: 39.00 39.00 Total Due: 39.00

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail:lab@ColumbiaInspection.com

RECEIVED

FEB 2 3 2000

KOPPERS INDS, INC. PORTLAND OR

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection





0296-001

#### CERTIFICATE OF ANALYSIS

CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 02/15/20

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE CLIENTS ID# DATE TIME

 DATE
 TIME
 MATRIX
 DESCRIPTION

 02/15/2000
 1030
 Water
 WW TKS

REPORT DATE: 02/18/2000 REPORT NUMBER: 0296 PAGE: 1 OF 1

DETECTION SAMPLE ANALYSIS PARAMETER RESULT UNIT LIMIT analyst WW TKS 0296-001 O & G TOTAL (HEM) TOTAL OIL AND GREASE 7.1 mg/L 2 Gordon L. EPA 1664

REVIEWED BY:

Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362			\$39		
					· · · · · · · · · · · · · · · · · · ·				500296	2/15/00
		<del> </del>			<del></del>	<u> </u>		<del></del>		
									Vendor Number	
						<u> </u>			014327008	
										<del></del>
				Gross Amour	nt			\$39.00	Terms	Due
	1	•		Discount					Code	Date
ithoria	tion			Net				\$39.00	045	
H P	m							Division	Month	Audit No.
							. }	483	2	9270002005



# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 02/14/2000

**INVOICE NUMBER: 500242** 

PAGE: 1

REPORT DATE:02/09/2000	LABORATORY	REPORT	NUMBER:	0242
Client's Project Name: WASTE WATER ANALYSIS				
Date Submitted: 02/08/2000				
Sample Description: WW TKS				
			!	
Analysis of the Water Sample.				
O & G TOTAL (HEM)		\$	39.00	
Total:		\$	39.00	\$ 39.00
otal Due:				\$ 39.00
				·
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	R	EC	EIV	ED
		l	5 2000	
	KO	]		
		PORTL	INDS, I AND OR	NC.

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone:(503) 286-9464 Fax:(503) 286-5355 E-mail:lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 02/08/20

PROJECT NAME: WASTE WATER ANALYSIS

PROJECT NUMBER: NONE PROVIDED

CI SAMPLE	CLIENTS ID#	DATE	TIME I	MATRIX	DESCRIPTION	ON		
0242-001		02/08/2000	0900	Water	WW TKS	<del>,</del>		<u> </u>
REPORT DAT	E: 02/11/2000	······································	REP	ORT NUMBE	R: 0242			PAGE: 1 OF 1
<del></del>	<del></del>					<del></del>	DETECTION	
SAMPLE WW TKS	ANALYSIS	PARAMET	ÆR		RESULT	UNIT	LIMIT	ANALYST
0242-001	O & G TOTAL (HEM)	) TOTAL O	OIL AND	GREASE	4.7	mg/L	2	Gordon L.

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362			\$39		
									500242	2/14/00
								 	Vendor Number	
									014327008	
	L			Gross Amou	nt	<u> </u>		\$39.00	Terms	Due
				Discount					Code	Date
Authoriza	on			Net				\$39.00	045	
M.								Division	Month	Audit No.
		_					1	483	2	42700020023

Columbia Inspection, Inc. P.O. Box 83569
Portland,, OR 97283
U.S.A.

Statement

Statement Date: Jan 31, 2000

**Customer Account ID:** 

071

Voice: 503-286-9464 Fax: 503-285-7831

Account Of: Koppers Industries, Inc.

7540 NW St. Helens Road Portland,, OR 97210-3663

Amount Enclosed

10/29/99 11/13/99 592146 Paid 12·14·99 Check # 374959 39.00 3 12/14/99 12/29/99 592400 > paid 2·1·00 Check # 379465 39.00 11 12/17/99 1/1/00 592461 > paid 2·1·00 Check # 379465 39.00 11 1/11/00 1/26/00 500006 291.50 40 1/13/00 1/28/00 500059 39.00 44	Date	Due Date	Reference	Paid	Description	Amount	Balance
FEB 1 1 2000 KOPPERS INDS, INC	12/14/99 12/17/99 1/11/00 1/13/00	12/29/99 1/1/00 1/26/00 1/28/00	592146 Paid 12. 592400 > paid 2. 592461 > paid 2. 500006 500059	14 • 99 1 · 00	check # 374959 Check # 37946	291.50 39.00	408.50
					KOI	FEB 1 1 2000 PERS INDS, IN	IC
Total 486							486.50

0-30	31-60	61-90	Over 90 days
408.50	39.00	39.00	0.00

7133 N. LOMBARD \* PORTLAND, OR 97203 \* 503-2286-9464 \* FAX 503-285-7831

February 10, 2000

#### TO ALL OUR CUSTOMERS:

Terms at Columbia Inspection, Inc. are Net 15. Effective March 01, 2000 all invoices 30 days or more over-due, will be subjected to a 1.5% Finance fee.

Finance Fees will accumulate each month on each past due invoice.

Thanks for your understanding in this matter.

Sincerely,

Connie Brown Bookkeeper

Copy to:

Mark Dickerson - Vice President / Operations
Marvin Schwartz - Vice President / General Manager

PORTLAND, OR \* TACOMA, WA \* SAN FRANCISCO, CA \* LOS ANGELES, CA

Koppers002214\_\_\_\_\_



## U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 02/04/2000

**INVOICE NUMBER: 500192** 

PAGE: 1

PORT DATE:02/0	2/2000		LABORATORY	RE POR	NUMBER:	0192	
Client's Projec	t Name: WASTE W	ATER ANALYSIS					
Date Submitted:	02/01/2000						
Lab Number	Sample Number	Sample Description					
20000192-001-01	*****	WW TKS		-			
20000192-001-02		WW TKS					
Analysis of the	Water samples.						
O & G TOTAL (HE	M) *	1 @ \$ 50.00		\$	50.00		
PHENOLS, TOTAL*	Quoted.	1 @ \$ 35.00		\$	35.00		
Total:				\$	85.00	\$	85.00
al Due:						\$	85.00
	R	ECEIVE					
		FEB - 7 2000					
	N	OPPEN OF					

COLUMBIA INSPECTION, INC.7133 N. Lombard, Portland, OR 97203 Phone:(503) 286-9464 Fax:(503) 286-5355 E-mail:lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 02/01/20

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE

CLIENTS ID#

DATE

TIME MATRIX

Water

DESCRIPTION

0192-001

0192-001

02/01/2000 0900

WW TKS

REPORT DATE: 02/03/2000 REPORT NUMBER: 0192 PAGE: 1 OF 1 DETECTION SAMPLE ANALYSIS PARAMETER RESULT UNIT LIMIT analyst WW TKS SAMPLE ID:

O & G TOTAL (HEM) EPA 1664

TOTAL OIL AND GREASE

2.8

mg/L

Gordon L.

0.05

PHENOLS, TOTAL TOTAL RECOVERABLE PHENOLICS EPA 420.1

ND

mg/L

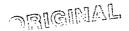
Abby K.

REVIEWED BY:

**Vendor Name** 

Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax .	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	925	0362			\$85		
									500192	2/4/00
									Vendor Number	
									014327008	
				Gross Amour	nt			\$85.00	Terms	Due
				Discount					Code	Date
	uthorization Net						\$85.00	045	L	
Jim								Division	Month	Audit No.
								483	2	92700020019





## U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 01/26/2000

**INVOICE NUMBER: 500153** 

PAGE: 1

EPORT DATE:01/25/2000	LABORATORY	REPORT	NUMBER:	0153
Client's Project Name: WASTE WATER ANALYSIS				
Date Submitted: 01/25/20				
Sample Description: WWTks			;	
Analysis of the Water Sample.		{		
O & G TOTAL (HEM) 1 @ \$ 39.00		\$	39.00	
Total:		\$	39.00	\$ 39.00
tal Due:				\$ 39.00
				<b>M</b> (F #32F)
			CE	V
		J	AN 27	2000
		KOPP	ERS IN	DS, INC
		PO	RTLAN	DS, INC D OR

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com

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Thank you for doing business with Columbia Inspection



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 01/25/20

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE	CLIENTS ID#	DATE	TIME	MATRIX	DESCRIPTION
0153-001	<del></del>	01/24/00 1	400 W	ater	WWTks

	<del></del>	
REPORT DATE: 01/26/00	DEDODA NIMBED, U123	DXC12 · 1 OF 1

REPORT DATE	E: U1/26/UU	REPORT NUMBER:	0123			PAGE: I OF I
SAMPLE	ANALYSIS	PARAMETER	result	UNIT	DRIECTION LIMIT	ANALYST
WWTks		SAMPLE ID:				
0153-001	O & G TOTAL (HEM) EPA 1664	TOTAL OIL AND GREASE	2,8	mg/L	2	Gordon L.

REVIEWED BY: 6

Vendor Name

Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	910	0362			\$39		
				925					500153	1/26/00
									Vendor Number	
									014327008	
					•					
				Gross Amour	nt			\$39.00	Terms	Due
				Discount					Code	Date
uthori	ton			Net				\$39.00	045	
The state of the s								Division	Month	Audit No. 927001006
							1	483	1	92700010064



# U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 01/13/2000

**INVOICE NUMBER: 500059** 

PAGE: 1

EPORT DATE:01/11/2000		LABORATORY	REPORT	NUMBER:	000059
Client's Project Name:	W W TANKS				
Date Submitted: 01/1	1/20				
Sample Description:	WASTE WATER GRAB SAMPLE				
Analysis of the Water Sam	ple.				
0 & G TOTAL (HEM)*	1 @ \$ 39.00		\$	39.00	
Total:			\$	39.00	\$ 39.00
	necessary from the second				
	RE(	CIVE			
cal Due:	JĄ	N 1 4 2000			\$ 39.00
	KUDDI	ERS INDS, INC			
	P()	RTLAND OR			
	P0	RTLAND OR			

C OLUMBIA I NSPECTION, I NC. 7133 N. Lombard, Portland, OR 97203 Phone:(503) 286-9464 Fax:(503) 286-5355 E-mail:lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

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### CERTIFICATE OF ANALYS

CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 01/11/20

PROJECT NAME: W W TANKS

CI SAMPLE

CLIENTS ID#

DATE

TIME MATRIX

DESCRIPTION

0059-001 01/11/2000 0900 Water

REPORT NUMBER: 000059

WASTE WATER GRAB SAMPLE

REPORT DATE: 01/11/2000 PAGE: 1 OF 1 DETECTION SAMPLE ANALYSIS PARAMETER RESULT UNIT LIMIT ANALYST WASTE WATER GRAB SAMPLE SAMPLE ID: 0059-001 O & G TOTAL (HEM)

EPA 1664

TOTAL OIL AND GREASE

ND

mg/L

Gordon L.

Quality Manager

Vendor Name

Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	910	0362			\$39		
									500059	1/13/00
·									Vendor Number	
			I						014327008	
				Gross Amou	nt			\$39.00	Terms	Due
				Discount					Code	Date
uthoriza	on			Net				\$39.00	045	
M	<u></u>						1	Division	Month	Audit No.
								483	1	92700010036



## COLUMBIA INSPECTION, INC.

## U.S. CUSTOMS APPROVED GAUGERS PETROLEUM AND ENVIRONMENTAL LABORATORY TANK CALIBRATIONS

**INVOICE** 

KOPPERS INDUSTRIES, INC. ATTN: AMOS KAMERER 7540 NW ST. HELENS ROAD PORTLAND, OR 97210-3663

INVOICE DATE: 01/11/2000

**INVOICE NUMBER: 500006** 

PAGE: 1

PORT DATE:01	/05/2000	LABORA?	TORY REPORT NUMBER	: 000006
Client's Pro	ject Name: WASTE	WATER TANKS		
Date Submitt	ed: 01/03/19			
Lab Number	Sample Number	Sample Description		
20000006-001-	-01	WASTE WATER GRAB SAMPLE	RECE	MEN
20000006-001	-02	WASTE WATER GRAB SAMPLE		V lens L
20000006-001	-03	WASTE WATER GRAB SAMPLE	101140	
			JAN 1 2	2000
			KOPPERS IN	DS INC
Analysis of	the Water samples.		PORTLAN	
O & G TOTAL	(HEM)	1 @ \$ 39.00	\$ 39.00	]
		1 1 @ \$ 35.00	\$ 35.00	
PNAH 2	Quote	1 1 @ \$ 145.00	\$ 145.00	
Total:			\$ 219.00	\$ 219.00
RUSH FEE		••••	\$ 72.50	\$ 72.50
			Ì	
			ļ	
				1
				}
al Due:			1	\$ 291.50

C OLUMBIA I NSPECTION, I NC. 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail:lab@ColumbiaInspection.com

All work performed is subject to the terms and conditions of our current schedule of rates. Liability is limited to the amount of this invoice.

Thank you for doing business with Columbia Inspection

Please state invoice number and remit to:
Columbia Inspection, Inc.
P.O. Box 83569, St. Johns Station
Portland, OR 97283



### CERTIFICATE OF ANALYSIS

CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

ORIGINATION

DATE SUBMITTED: 01/03/19

PROJECT NAME: WASTE WATER TANKS

	CLIENTS ID# DATE		DESCRIPTION			
000006-001		3/2000 1000 Water	WASTE WATE	R GRAB SAM	PLE	
REPORT DAT	TE: 01/05/2000	REPORT NUMBER:	000006			PAGE: 1 OF
					DETECTION	
SAMPLE	ANALYSIS	PARAMETER	RESULT	UNIT	LIMIT	analyst
WASTE WATER	GRAB SAMPLE	SAMPLE ID:				
000006-001	O & G TOTAL (HEM)	TOTAL OIL AND GREASE	ND	mg/L	2	Gordon L.
	PHENOLS, TOTAL	TOTAL RECOVERABLE PHENOLICS	0.16	mg/L	0.05	Dick R.
	PNAH 2	ACENAPHTHENE	7.7	ug/L	0.05	Jacob F.
	EPA 625 (SIM)	ACENAPHTHYLENE	1.3	ug/L	0.05	
		ANTHRACENE	5.2	ug/L	0.05	
		BENZO (A) ANTHRACENE	24	ug/L	0.05	
		BENZO (A) PYRENE	42	ug/L	0.2	
		BENZO(B) FLUORANTHENE	30	ug/L	0.2	
		BENZO (GHI) PERYLENE	34	ug/L	0.5	
		BENZO(K) FLUORANTHENE	29	ug/L	0.2	
		CHRYSENE	29	ug/L	0.05	
		DIBENZO (AH) ANTHRACENE	5.6	ug/L	0.3	
		FLUORANTHENE	46	ug/L	0.05	
		FLUORENE	5.5	ug/L	0.05	
		INDENO(1,2,3-CD)PYRENE	38	ug/L	0.4	
		NAPHTHALENE	0.79	ug/L	0.05	
		PHENANTHRENE	16	ug/L	0.05	
		PYRENE	42	ug/L	0.05	
		SURROGATE	77%	% RECOV	ERY 50%-150%	

REVIEWED BY:

Martin Little - Quality Manager

**Vendor Name** 

Columbia Inspection

G/L	Detail	Subdetail	Location	Department	Tax	Emp No.	Move No./ PO No.	Amount	Inv No.	Date
305	807		9270	910	0362			\$292		
									500006	1/11/00
,=										
									Vendor Number	
									014327008	
				Gross Amour	nt		,	\$291.50	Terms	Due
	_			Discount					Code	Date
ıthoriza	on .			Net				\$291.50	045	
M	in-							Division	Month	Audit No.
		_					]	483	1	92700 <b>0</b> 10027 9 <del>270810</del> 7

Columbia Inspection, Inc. P.O. Box 83569
Portland,, OR 97283
U.S.A.

Statement Date: Dec 31, 1999

Statement

Customer ID: 071

Voice: 503-286-9464 Fax: 503-285-7831

**Account Of:** 

Koppers Industries, Inc. 7540 NW St. Helens Road Portland,, OR 97210-3663

Amount Enclosed

\$

					•	
Date	Date Due	Reference	Paid	Description	Amount	Balance
10/29/99 11/12/99 11/22/99 11/30/99 12/6/99	11/13/99 11/27/99 12/7/99 12/15/99 12/21/99	592146 * 592214 * 592282 * 592316 * 592366 ~ ]	Processed in Mov. 149 Processed	<b>9</b>	39.00 74.00 39.00 39.00 74.00	113.00 152.00 191.00 265.00
12/14/99  12/17/99	12/29/99 1/1/00	592400 × 5 592461 ×	in December	1999	39.00l	
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		'5' <u>'</u>	 		RECEIV	ED
			!		JAN 1 2 2000	
 			 		KOPPERS INDS.	INC.
'			'		TOTAL	343.00
1	0-30	31	60	61-90	Over 90	days
l	230.00	; 11	3.00	0.00	0.00	1

and the second of the second o

Please attend to this payment as soon as possible.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

national Pollutant discharge elimination system (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved

PERMITTEE NAME ADDRESS (Include

Facility Name/Location if different)

Koppers002228

EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED UNTIL SUPPLY IS EXHAUSTED.

#### GENERAL INSTRUCTIONS 1. If form has been partially completed by preprinting, disregard instructions directed at entry of that information already preprinted. Enter, "PERMITTEE NAME/MAILING ADDRESS (and facility name/location, if different)," "PERMIT NUMBER," and "DISCHARGE NUMBER," where indicated. (A separate form is required for each discharge.) Enter dates beginning and ending "MONITORING PERIOD" covered by form where indicated. Enter each "PARAMETER" as specified in monitoring requirements of permit. Enter each "PARAMETER" as specified in monitoring requirements of permit. Enter "SAMPLE MEASUREMENT" data for each parameter under "QUANTITY" and "QUALITY" in units specified in permit. "AVERAGE" is normally arithmetic average (geometric average for bacterial parameters) of all sample measurements for each parameter obtained during "MONITORING PERIOD." "MAXIMUM" and "MINIMUM" are normally extreme high and low measurements obtained during "MONITORING PERIOD." (NOTE: to municipals with secondary treatment requirement, enter 30 day average of sample measurements under "AVERAGE" and enter maximum 7-day average of sample measurements obtained during monitoring period under "MAXIMUM". Enter PERMIT REQUIREMENT" for each parameter under "QUANTITY" and "QUALITY" as specified in permit. Under "NO. EX" enter number of sample measurements during monitoring period that exceed maximum (and/or minimum of 7-day average as appropriate) permit requirement for each parameter. If none, enter "0" Enter FREQUENCY OF ANALYSIS" both as "SAMPLE MEASUREMENT" (actual frequency of sampling and analysis used during monitoring period) and as "PERMIT REQUIREMENT" specified in permit (e.g., Enter "CONT" for continuous monitoring, "1/7" for one day per week "1/30" for one day per month. "1/90" for one day per quarter, etc.) Enter SAMPLE TYPE" both as "SAMPLE MEASUREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT." (e.g., Enter "GRAB" for individual sample. "24HC" for 24-hour composite. "N/A" for continuous monitoring, etc.) (тейін зазн одон) Ω 10. WHERE VIOLATIONS OF PERMIT REQUIREMENTS ARE REPORTED, ATTACH A BRIEF EXPLANATION TO DESCRIBE 46-23 1.4 O CAUSE AND CORRECTIVE ACTIONS TAKEN REFERENCE EACH VIOLATION BY DATE If 'no discharge" occurs during monitoring period, enter "NO DISCHARGE" across form in place of data entry Enter NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER With "SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR CHAC AUTHORIZED AGENT." "TELEPHONE NUMBER Sand "DATE" at bottom of form. 13. Mail signed Report to Office(s) by date(s) specified in permit. Retain copy for your records. 14. More detailed instructions for use of this DISCHARGE MONITORING REPORT (DMR) form may be obtained from Office(s) specified in permit. LEGAL NOTICE This report is required by law (33 U.S.C. 1318: 40 C.F.R. 125.27). Failure to report or failure to report truthfully can result in vivil penaltics not to exceed \$10000 perdial of violation for in criminal penalties not to exceed \$25,000 per day of violation for by imprisonment for not more than one year, or by both. <u>``</u> 6 LOFD HERE SECOND Z I STATE Tours No. 1177 WHAT. **文明** (4) Z n Z A THE CAME THE SE 3 THE PERSON 3,4 からにあられ - 477 100 45 Ü \$ **建分工工** 3 받 1 .0 i. Q Ĥ. 7.0% POLD HERE THIRD 47 L 34 is.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

то

(4 Cord Only)

(38-45)

MINIMUM

/17-191

10

DISCHARGE NUMBER

12

3/

730.311

(46-53)

AVERAGE

5.95

QUALITY OR CONCENTRATION

YEAR MO

(26-27) (28-29)

a

3077- 5

(54-61)

MAXIMUM

NOTE: Read instructions before completing this form.

UNITS

474.30

12:161

DK-1000177-9

PERMIT NUMBER

МО

12

UNITS

GPD

(20-21) (22-23) (24-25)

DAY

YEAR

91

QUANTITY OR LOADING

(54-61)

MAXIMUM

NA

Card Only)

(46-53)

2903

MEASUREMENT

PERMIT REQUIREMENT

SAMPLE MEASUREMENT

PERMIT REQUIREMENT SAMPLE MEASUREMENT AVERAGE

PERMITTEE NAME/ADDRESS /Include

PARAMETER

(32-37)

LOCATION

Form Approved
OMB No. 2040-0004

Expires 3-31-88

FREQUENCY

OF ANALYSIS

(64-68)

3/

62-63)

SAMPLE

TYPE

(69-70)

12-20-91 W.W. T-4 Ph 5.7 Water Temp. 46°

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# Koppers002233

#### **COFFEY LABORATORIES INC.**

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



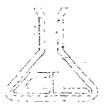
#### **COFFEY LABORATORIES - PENDLETON BRANCH**

287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

#### **CHAIN OF CUSTODY**

PROJECT #:				l l	E of PAGES LEASE PRINT OR TYPE	FOR LABORATORY USE ONLY			
COMPANY NAME:						JOB #:	. * . * . * . * . * . * . * . * . * . *		
REPORT ATTENTIO	ON: John Os	Ford			٠.	W6911221	0-12		
SAMPLES COLLEC	TED BY:	24				CUSTABBR:			
Grora		n				Koppers			
FIELD IDENTIFICAT	TON: //	LAB	COLLECTION				ANALYSIS		
ONE LINE PER SAMPLE	CONTAINER	LOC ID	DATE T	TIME MEDIA	ANALYSIS	REQUESTED	REMARKS		
	T-3		12-26-91 3:	15 PM NW	011 4 6re	ase			
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RELINQUISHED BY	Gronge Hoff	m art 12	DATE/TIME	RECEIVED BY LAB	Danette V	the parelyines/a	1620		
SAMPLE REMARKS	' '	·		LEVEL 1		XPRISS UPS MAIL CXX	GREY TAXI LAB		
WHITE COPY - COP	FFY LABORATORIES					PINK (	COPY CLIENTS COPY		

#### COFFEY LABORATERIES, INC.



#### CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

**PROJECT NUMBER** — Applies only to samples submitted by the company. This data is provided at the companies discretion.

PROJECT NAME — Your company's project name. This data is provided at the companies discretion.

COMPANY NAME — Name of the Company or individual requesting the analysis from Coffey Laboratories, Inc.

REPORT ATTENTION -- Name of the person who receives the laboratory report.

SAMPLE COLLECTED BY — The person who took the sample signs this box and gives his/her title.

FIELD ID — A short description of the sample point (For example: "Effluent from sand filter"). This description will appear on the report. Use one line per sample bottle.

CULLECTION DAYE — The date on which the sample(s) was/were collected

COLLECTION TIME -- The time at which the sample(s) was/were collected.

MEDIA — This is a description of the same anatrix.

ANALYSIS REQUESTED — Make one column for each parameter or group of parameters associated to a bottle.

FOR LAB USE CMLY — Do not mark in this area (Laboratory location & ID). All shaded areas are for laboratory use only. Please do not write in these areas.

REMARKS — Record any comments about each sample on the same line as the sample description, e.g., "Wastewater contains VOCs".

RELINGUISHED BY — The sampler signs this box when he/she gives the sample to someone else, and then fills in the date and time they left his possession.

RECHIVED WY — The person who receives the samples signs here and fills in the date and time received. The date and time should be the same as the last one unless the samples were shipped.

SAMPLE REMARKS — Record any comments regarding the sample(s) as a whole or information pertinent to the sample.

SAMPLES SUPPED VIA -- How the samples are being shipped to the laboratory, e.g., "UPS".



#### FACSIMILE TRANSMITTAL LOG

TO:	Compar	y Name:_	Ko	ppers		Date	1/8/	92
À	Attent	:10n:	Eorge	- Hoffen	rion		/ /	•
. 1	Phone	#: (	285	- 1283	3/			<del>Va.</del>
# of I	Pages	(Includi	ng Cove	r Sheet):				
TELEC	opier	PHONE #:	(503)	254-1452	CONFIRMATION	PHONE #:	(503)	254-1794
COMME	: aTW	Lean	15	to san	efler Coli	lected	on 12	126/91
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WASTEWAT.FOR Doc. IL.

Volume: FORM Section: 4.0

Revision #: 1.00

Date: December 23, 1991

#### Wastewater Analysis Form

		Detection	1.2.2	Just Ch	
Parameter	Method	Limit	WW(-3	WWT4	Units
рн	EPA 150.1		:		s.u.
Flash Point	EPA 1020				°F
TSS	EPA 160.2	1			mg/L
BOD	EPA 405.1	1 .			mg/L
COD	EPA 410.4	1			mg/L
Oil & Grease	EPA 413.2	0.5	0.6	0.8	mg/L
Total Cyanide	EPA 335.2	0.02			mg/L
Free Cyanide	SM 412-H	0.02			mg/L
Ammonia	SM 417-A,D	0.2			mg/L
Fluoride	EPA 340.2	0.2			mg/L
Total Phenols	EPA 420.1	0.05	0.18	0.22	mg/L
Total Sulfides	SM 427-C	0.05			mg/L
Cadmium	*	0.02			mg/L
Chromium	*	0.05			mg/L
Copper	*	0.05	·		mg/L
Lead	*	0.1			mg/L
Mercury	EPA 7470	0.1			mg/L
Nickel	*	0.05			mg/L
Silver	*	0.05			mg/L
<sup>°</sup> Zinc	*	0.05			mg/L
·					mg/L
					mg/L

Silver	*	0.05	mg/L
Zinc	*	0.05	mg/L
· ·			mg/L
			mg/L
Add on EPA 601/601	EPA 624	EPA 625	QC

per

Flow

WW 3 45 000 WW 4 45000 = 90000 -31 = 2923

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46 = 92 - 2 = 46

Ph.

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0.8= 1.4 = 2 0.7

Pherolo.

0.18

1.22 - 0.4-2 = 0.2



Report Date: January 9, 1992

Job#: WG-911226X-2 PO#: VERBAL JOHN (O&G/Phenols)

Attention: John Oxford Koppers Industry 7540 NW St. Helens Rd.

Portland, OR 97210

SAMPLE INFORMATION:

Date Samples Were Received By Laboratory: 12/26/91

Lab No.	Field Identification	Sample Matrix	Date	Time
			- +	
1	W-W-T-3	Waste Water	12-26-91	1515
2	W-W-T-4	Waste Water	12-26-91	1515

#### ANALYTICAL RESULTS:

		DETECTION	W-W-T-3	W-W-T-4
PARAMETER	METHOD	LIMITS	RESULTS	RESULTS
Oil & Grease	EPA 413.2	0.5	0.6	0.8
Total Phenols	EPA 420.1	0.05	<b>Q.</b> 18	0.22

Results expressed as mg/L unless otherwise noted.

Sincerely,

Renee Chauvin Technical Director

RJC/lws

This report is for the sole and exclusive use of the above-named client. Samples are retained 15 days from the report date, or until holding time expires. Results pertain only to samples submitted.

7540 NW ST H	RMITTEE NAME/ADDRESS (Include still y Name/Location if different)  ME KOPPERS INDUSTRIES INC			DISCHARGE MONITORING REPORT (DMR)  (2-16)  OR-100077-9 PERMIT NUMBER  (2-16)  DISCHARGE NUMBER				Form Approved OMB No. 2040-0004 Expires 3-31-88							
					MONI	TORIN	G PERI	OD,		3077-J					
LOCATION MILITINOMATIC			— FROM	YEAR	мо п	AY TO	YEAR	мо	DAY	47430					
LOCATION MULTNOMATH	COUNTY		<del>Pedom</del>	(20-21)	(22-23) (24	- 1	(28.27)	(28-29)	(30 <u>91)</u>	NOTE: Read in	structions	s before co	mpleting 1	his fo	rm.
PARAMETER		(3 Card Only) Q1 (46-53)	JANTITY OR (54-61	LOADIN		(4 Card	Only) 1-45)		ITY OR C	ONCENTRATION (54-61)	***************************************	ИО	FREQUEN	CY S	AMPLE
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COMMENT AND EXPLANATION OF A	NY VIOLATIONS (R	eference all attachme	nts here)				,L,				CODE				
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Koppers002239

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FERMITTEE NAME ADDRESS (Includ Facility Name/Location if different)  NAME OF FRS  ADDRESS 740 NW	e <u>ENDUSTRIL</u> STIJELI	S INC	NATIONAL POLI DISCH	ARGE MO (2-16)		ORT (DMR)			OMB N	pproved o. 2040-0004 3-31-88
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PARAMETER		(3 Card Only) QU/ (46-53)	ANTITY OR LOADIN (54-61)	iG .	(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO. FREQUE	NCY SAMPLE TYPE
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$$11-26-91$$
  
 $W-WT-2$   
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 $Temp=50^{\circ}F$ 

# Koppers002245

#### COFFEY LABORATORIES INC.

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



#### **COFFEY LABORATORIES - PENDLETON BRANCH**

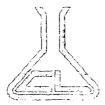
287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

#### **CHAIN OF CUSTODY**

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PROJECT #: PROJECT NAME:	•	P.O. #:		PAGE _	of PAGES	FOR LABORATO	DRY USE ONLY
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	OXFORD	•			· ·	$\mathcal{W}(\mathcal{G}_{\mathcal{M}})$	126-ALZ
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						KOPPERS	
FIELD IDENTIFICATION: `	LAB .	COLLEC	TION				ANALYSIS
ONE LINE PER SAMPLE CONTAINER	LOC ID	DATE	TIME	MEDIA	ANALYSIS RI	EQUESTED	REMARKS
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WHITE COPY - COFFEY LABORATORIES		Ť	L 25%			PIN	K COPY - CLIENTS COPY

SHADED AREA FOR LABORATORY USE ONLY CHAIN OF CUSTODY INSTRUCTIONS ON BACK OF PINK COPY

#### COFFEY LABORATORIES, THE



#### CHAIN OF CUSTODY INFORMATION / INSTRUCTION'S SHEET

PROJECT NUMBER — Applies only to samples submitted by the company. This data is provided at the companies discretion.

PROJECT NAME — Your company's project name. This data is provided at the companies discretion.

COMPANY MAINE — Name of the Company or individual requesting the analysis from Coffey Laboratories, Inc.

REPORT ATTENTION — Name of the person who receives the laboratory report.

SAMPLE COLLECTED BY — The person who took the sample signs this box and gives his/her title.

FIELD ID — A short description of the sample point (For example: "Effluent from sand filter"). This description will appear on the report. Use one line per sample bottle.

COLLECTION DAYE - The date on which the sample(s) was/were collected.

**COLLECTION** TIME — The time at which the sample(s) was/were collected.

MEDIA — This is a description of the sample matrix.

ANALYSIS REQUESTED — Make one column for each parameter or group of parameters associated to a bottle.

FOR LAB USE ONLY — Do not mark in this area (beboratory location & ID). All shaded areas are for laboratory use only. Please do not write in these areas.

級EMARKS — Record any comments about each sample on the same line as the sample description, e.g., "Wastewater contains VOCs".

RELINQUISHED BY — The sampler signs this box when he/she gives the sample to someone else, and then fills in the date and time they left his possession.

RECEIVED BY — The person who receives the samples signs here and fills in the date and time received. The date and time should be the same as the last one unless the samples were shipped.

SANN-LE REMARKS — Record any comments regarding the sample(s) as a whole or information pertinent to the sample.

SAMULES SHIPPED VIA -- How the samples are being shipped to the laboratory, e.g., "UPS".



Report Date: December 9, 1991

Job#: WG-911126AL-2 PO#: VERBAL JOHN (O&G/Phenole)

Attention: John Oxford

Koppers Industry

7540 NW St. Helens Rd.

Portland, OR 97210

#### SAMPLE INFORMATION:

Date Samples Were Received by Laboratory: 11/26/91

La	D No.	Field Identification	Sample Matrix	Date	Time
		****		~	
	1	WW T-1	Waste Water	11-26-91	1600
	2	AA 1-5	Waste Water	11-26-91	1600

#### ANALYTICAL BESULTS:

		DETECTION	¥₩ T-1	WW T-2
PARAMETER	Method	LIMITS	RESULTS	RESULTS
				~
011 & Grease	BPA 413.2	0.2	2.8	1.3
Total Phenols	BPA 420.1	0.05	ND	9.96

Results expressed as mg/L unless otherwise noted.

ND means none detected at or above the detection limit listed.

Sincerely,

Renee Chauvin Technical Director

#### RJC/lws

This report is for the sole and exclusive use of the above-named client. Samples are retained 15 days from the report date, or until holding time expires. Results pertain only to samples submitted.

11-19-91 W-W-T-4 Ph 6,2

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water Temp.
52

11-19-91 W-W-7-3 Ph 6,5

water Temp. 52

#### COFFEY LABORATORIES INC.

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452

#### **COFFEY LABORATORIES - PENDLETON BRANCH**

287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

#### **CHAIN OF CUSTODY**

PROJECT #: PROJECT NAME:	P.O. #:			of		ole ongone tour	UsicoN - 1
			, PLI	EASE PRINT OR T	YPE'	er tali siliki	
COMPANY NAME: KOPPEYS INd.			i		J. J. J.		
REPORT ATTENTION: JOHN OX FORd	·				Pacific > 1		
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Groral Hoffm an =					1400	ZVI S Bir	
FIELD IDENTIFICATION:	COLLE	CTION	*. . I		,	1.5	ANALYSIS
ONE LINE PER SAMPLE CONTAINER	DATE	TIME	MEDIA		ANALYSIS REQUESTED	· · ·	REMARKS
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#### COFFEY DECRATORIES, INC.



#### CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

PROJECT NUMBER — Applies only to samples submitted by the company. This data is provided at the companies discretion.

PROJECT NAME — Your company's project name. This data is provided at the companies discretion.

COMPANY NAME — Name of the Company or individual requesting the analysis from Coffey Laboratories, lec-

REPORT ATTENTION — Name of the person who receives the laboratory report.

SAMPLE COLLECTED BY -- The person who took the sample sighs this box and gives his/hersitle.

FIELD ID — A short description of the sample point (For example "Effluent from sand filter"). This description will appear on the report. Use one line per sample bottle.

COLLECTION DATE - The date on which the sample(s) was were collected

COLLECTION TIME — The time at which the sample(s) was/were collected.

WEDMA — This is a description of the sample matrix.

ANALYSIS REQUESTED — Make one column for each parameter or group of parameters associated a bottle.

FOR LAB USE ONLY — Do not mark in this area (Laboratory location & ID), All shaded areas are for laboratory use only. Please do not write in these areas.

REMARKS — Record any comments about each sample on the same line as the sample description, e.g., "Wastewater contains VOCs"

RELINQUISHED DY — The sampler signs this box when he/she gives the sample to someone else, and then fills in the date and time they left his possession.

RECEIVED BY — The person who receives the samples signs here and fills in the date and time received. The date and time should be the same as the last one unless the samples were shipped.

SAMPLE REMARKS — Record any comments regarding the sample(s) as a whole or information pertinent to the sample.

SAMPLES SHIPPED VIA — How the samples are being shipped to the laboratory, e.g., "UPS

(7/90)



Report Date: November 27, 1991

Job#: WG-911119AP-2 PO#: VERBAL JOHN

(O&G/Phenols)

Attention: John Oxford Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210

SAMPLE INFORMATION:

Date Samples Were Received By Laboratory: 11/19/91

Lab No.	Field Identification	Sample Matrix	Date	Time
1	W-W-T-3	Waste Water	11-19-91	1540
2	W-W-T-4	Waste Water	11-19-91	154Q

#### ANALYTICAL RESULTS:

		DETECTION	W-W-T-3	W-W-T-3
PARAMETER	METHOD	LIMITS	RESULTS	RESULTS
		,		
O11 & Grease	EPA 413.2	0.5	8.9	0.8
Total Phenols	EPA 420.1	0.05	0.19	<b>Q.12</b>

Results expressed as mg/L unless otherwise noted.

Sincerely.

Renee Chauvin Technical Director

RJC/lws

This report is for the sole and exclusive use of the above-named client. Samples are retained 15 days from the report date, or until holding time expires. Results pertain only to samples submitted.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Koppers002253

PERMITTEE NAME/ADDRESS (Include

Form Approved

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

(4 Card Only)

(38-45)

MINIMUM

5-8

YEAR

41

OR-101077-1

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10

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GPD

(20-21) (22-23) (24-25)

DAY

YEAR

91

QUANTITY OR LOADING

(54-61)

MAXIMUM

(3 Card Only)

SAMPLE MEASUREMENT

PERMIT REQUIREMENT

SAMPLE

MEASUREMENT

PERMIT REQUIREMENT (46-53)

AVERAGE

2903, 725

(17-19)

DISCHARGE NUMBER

DAY

31

(46-53)

AVERAGE

5-8:5

QUALITY OR CONCENTRATION

мо

(26-27) (28-29) (30-31)

10

3077- 5

(54-61)

MAXIMUM

NOTE: Read instructions before completing this form.

UNITS

NO.

EX

(62-63)

47430

PERMITTEE NAME/ADDRESS (Include

PARAMETER

(32-37)

Facility Name/Location if differenti

LOCATION

Form Approved

Expires 3-31-88

FREQUENCY OF ANALYSIS

(64-68)

RAMPLE

TYPE

(69-70)

GRAB

OMB No. 2040-0004

# october Regregar

flow.

WW 1

WWZ

45000 = 90000-3/ - 2903,220

Temp.

59

58 = 1/7 - 2 = 5-8.5

Ph.

6.3

6.1 = 12.4 + 2 = 6,2

Dil + Dum

1. 9

1.5= 84-2= 17

Phrolo.

0.16

0.16 = 0.32 -2 = 0.16



Report Date: October 29, 1991 Job#: WG-911023AR-2

PO#: VERBAL JOHN (O&G/Phenols)

Attention: John Oxford

Koppers Industry

7540 NW St. Helens Rd. Portland, OR 97210

SAMPLE INFORMATION:

Date Samples Were Received By Laboratory: 10/23/91

Lab No.	Field Identification	Sample Matrix	Date	Time
1	W - W - T - 1	Waste Water	10-23-91	1500
2	W-W-T-2	Waste Water	10-23-91	1500

#### ANALYTICAL RESULTS:

		DETECTION	W - W - T - 1	W-W-T-2
PARAMETER	METHOD	LIMITS	RESULTS	RESULTS
011 & Grease	EPA 413.2	0.5	1.9	1.5
Total Phenols	EPA 42Q.1	0.05	<b>Q.</b> 16	Q.16

Results expressed as mg/L unless otherwise noted.

Sincerely,

Victor A. Perry,

Quality Assurance

Susan M. Coffey,

President

SMC/lws

This report is for the sole and exclusive use of the above-named client. Samples are retained 15 days from the report date, or until holding time expires. Results pertain only to samples submitted.

10-23-91 W-W-T-2 Ph 6-1

water Temp. 58

10-23-91 W-W-T-/ Ph 6-3 water Temp. 59

## **COFFEY LABORATORIES INC.**

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



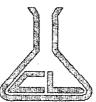
## **COFFEY LABORATORIES - PENDLETON BRANCH**

287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

# **CHAIN OF CUSTODY**

PROJECT #: PROJECT NA	ME:	P.O. #:	, · ·		of I ASE PRINT OR TY		FOR LABOR	ATORY USE ONLY
REPORT ATTENTION: John			4.		,		JOB #: (J. G-9110	23-ARZ
SAMPLES COLLECTED BY: George 1-	loFFmaN				Ng pul		CUSTABBR:	215
FIELD IDENTIFICATION:  ONE LINE PER SAMPLE CONTAINER	LAB LOC - ID	COLLEC DATE	TION TIME	MEDIA		ANALYSIS RI	EQUESTED	ANALYSIS REMÄRKS
W-W- T-1	1.00	0.23.9/3	3:00PM		01/ +	Grease	•	
W-W-T-1		11	, ,		Phen	ols		
W-W-T-2		, ,	, ,			Grease	<u>e</u>	
W-W-T-2		, 1	1+		Pher	ols		
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	1477.55							
							1,000	
			<del></del>					
RELINQUISHED BY:		DATE/TIME	RECE	IVED BY:	0 / 0	DATE/TI	IME	LAB USE:
RELINQUISHED BY: groups	Hoffman 10.2	DATE/TIME	RECE	IVED BY LAB:	John Soul	gent	DATE/TIME	(0/23/91 1545
SAMPLE REMARKS:		٠,٢٠	ĻĹ	VEL 1 (	123 3	.4 EXF	PRESS UPS MAIL	CN GREY TAXI LAB
WHITE COPY - COFFEY LABORAT	ORIES		•				:	PINK COPY - CLIENTS COPY

# COFFEY LABORATORIES, INC.



# CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

**PROJECT NUMBER** — Applies only to samples submitted by the company. This data is provided at the companies discretion.

**PROJECT NAME** — Your company's project name. This data is provided at the companies discretion.

**COMPANY NAME** — Name of the Company or individual requesting the analysis from Coffey Laboratories, Inc.

**REPORT ATTENTION** — Name of the person who receives the laboratory report.

**SAMPLE COLLECTED BY** — The person who took the sample signs this box and gives his/her title.

**FIELD ID** — A short description of the sample point (For example: "Effluent from sand filter"). This description will appear on the report. Use one line per sample bottle.

**COLLECTION DATE** — The date on which the sample(s) was/were collected.

**COLLECTION TIME** — The time at which the sample(s) was/were collected.

**MEDIA** — This is a description of the sample matrix.

**ANALYSIS REQUESTED** — Make one column for each parameter or group of parameters associated to a bottle.

**FOR LAB USE ONLY** — Do not mark in this area (Laboratory location & ID). All shaded areas are for laboratory use only. Please do not write in these areas.

**REMARKS** — Record any comments about each sample on the same line as the sample description, e.g., "Wastewater contains VOCs".

**RELINQUISHED BY** — The sampler signs this box when he/she gives the sample to someone else, and then fills in the date and time they left his possession.

**RECEIVED BY** — The person who receives the samples signs here and fills in the date and time received. The date and time should be the same as the last one unless the samples were shipped.

**SAMPLE REMARKS** — Record any comments regarding the sample(s) as a whole or information pertinent to the sample.

SAMPLES SMIPPED VIA — How the samples are being shipped to the laboratory, e.g., "UPS".

Facility Name/Location if different)	NATION	DISCH	ARGE MO	NITORII	NG REP	ORT (DMR)	DISCHARGE MONITORING REPORT (DMR)  (2-16)  OMB No. 2040-0004									
ADDRESS 7540 NW CO UE		<del></del>			00077-			(17-19)				Expires 3-31				
ADDRESS 7540 NW ST HE	LENS RD		- <u>  - </u>		IT NUMBER		DISC	HARGE NUMBER				i <sup>-</sup>				
			· .	i <del></del>	MONI	TORIN	C PE DI	20				·				
FACILITY NORTHWEST PLA	NT			YEAR		AY	YEAR	MO DAY	3077-J	· ·						
LOCATION MULTNOMAH CO	UNTY		FROM	91	9	T 10	91	9 30	47430			"				
		(3 Card Only) QU	ANTITY OR		(22-23) (24		(26-27)		NOTE: Read instruction	tions befor	e com	pleting this	torm.			
PARAMETER		(3 Cara Only) QU. (46-53)	(54-61)		10	(4 Card (38		(46-53)	(\$4-61)		NO.	FREQUENCY OF	SAMPLE TYPE			
(32-37)		AVERAGE	MAXIM	IUM	UNITS	MIN	MUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)			
	SAMPLE MEASUREMENT	3000	1 (1) 1 (1) (2) (1)				100 mg/4 20 100 mg/4 20 100 mg/4				Ŋ	<sup>2</sup> /30	EST			
FLOW	PERMIT REQUIREMENT	3000	N/A		GPD ·											
·	SAMPLE MEASUREMENT					78	À	78	78	0	0	2 <sub>/30</sub>	GRAB			
TEMP	PERMIT REQUIREMENT							70	110	F						
	SAMPLE MEASUREMENT					6	.1	6.25	6.4		0	2 /30	GRAB			
PH	PERMIT REQUIREMENT					6	.0		9.0	SU						
:	SAMPLE MEASUREMENT	:					.5	0.5	0.5	MG,	O	2/ 30	GRAB			
OIL & GREASE	PERMIT REQUIREMENT									<b>'</b> Ľ	,					
	SAMPLE MEASUREMENT		, : , :				_12	0.13	0.14	MG/L	C	<sup>2</sup> / <sub>30</sub>	<b>G</b> RAB			
PHENOLS	PERMIT REQUIREMENT						-12	0.5	0.7	(PPM)						
	SAMPLE MEASUREMENT						3 A									
	PERMIT REQUIREMENT															
	SAMPLE MEASUREMENT								7.5%							
	PERMIT REQUIREMENT							,								
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER   CERTIF	FY UNDER PENALTY C	F LAW THAT	I HAVE I	PERSONALLY	EXAMINED NO BASED		1	// //	TELEPHONE		DA	TE			
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PLANT MANAGER	THE PO 33 U.S.C	SSIBILITY OF FINE AN 1919 (Penalties und	D IMPRISONMI	tes may in	18 U.S.C. §	1001 AND to \$10,000			PAL EXECUTIVE 503			1 38XX				
TYPED OR PRINTED	TYPED OR PRINTED 33 U.S.C. \$ 1319. (Penalties und and or maximum imprisonment of			uns ana o y	vears./	<u> </u>	OFFI	CER OR AUTHO	RIZED AGENT ARE	NUMB	ER	YEAR M	O DAY			

Koppers002262

5 Enter® SAMPLE MEASUREMENT" data for each parameter under "QUANTITY" and "QUALITY" in units specified in primiting "AVERAGE" is normally extheme to his analysis with medical variety for general parameters of the parameter obtained during "MONTORINO PERIOD." "MAXIMUM" and "MINIMUM" are normally extreme topic analysis and the manufacture of the manufactu	STAMP STAMP	100 100 100 100 100 100 100 100 100 100	BETTICLE OF STREETING CARLORN CERTA OF BETTICLE OF STREETING CONTRACTOR OF STR	ALAMA B	756 47 41 142 55 17 47 41 142 55	MEVADINE LANGE	THEMANICON	WLYZY SEMENT	Tarmer 1	THIMBAUE IN TO THE TO THE TO THE TOTAL TO TH	Groomsen.c., School	MF CONSEM (NO.	Takuanijosh	тизизина в м	HEGGERALLY THE PRESENT OF THE PRESEN	TM INTRUBAUM		3 7 7 7 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
"AVERAGE" is normally arithmetic average (geometric average for bacterial parameters) of all sample measurements for each parameter obtained during "MONITORING PERIOD." MAXIMUM" and "MINIMUM" are hormally view to be a substained during "MONITORING PERIOD." (NOTE: to municipals with selondary treatment requirement, enter 30-day viewage of sample measurements under "AVERAGE" and enter maximum 7-day average of sample measurements obtained during monitoring period under "MAXIMUM".  6. Enters PERMIT REQUIREMENT" for each parameter under "QUANTITY" and "QUALITY" as specified in permit.  7. Under "NO. EX" eiter number of sample measurements during monitoring period that exceed maximum (and/or minimum or "Alay average, as appropriate) permit tequirement for each parameter. (Linope, enter "O."  8. Enters PERMIT REQUIREMENT States by a standard of the sample period of the text of the sample monitoring period) and as PERMIT REQUIREMENT specified in permit (e.g., Enter "CONT" for continuous monitoring.  11-17 Tog one day per week "1/30" for one day per month. "1/90" for one day per quarter, etc.)  9. Enter "SAMPLE TYPE" both as "SAMPLE MEASUREMENT" (actual sample type used during monitoring period) and as 50 per month. "1/90" for one day per quarter, etc.)  10. WHERES/IOLATIONS OF PERMIT REQUIREMENTS ARE REPORTED, ATTACH A BRIEF EXPLANATION TO DESCRIBE.  11. Tog discharge" occurs during monitoring periodenter "NO DISCHARGE" across form in place of data entry.  12. Enter "SAMPLE TYPE" both as "SAMPLE MEASUREMENT" (actual sample type used during monitoring, etc.)  13. Mail ignod Report to Office(s)-by date(s) specified in permit. Retain copy for your records.  14. More desired instructions for use of this DISCHARGE MONITORING REPORT (DMR) form may be obtained from Office(s) as a specified in permit.  15. Enter of NAME/TITLE OF PPINCIPAL EXECUTIVE OFFICE ROW with "SIGNATURE OF PRINCIPAL EXECUTIVE OFFICE ROW of the specified in permit. Retain copy for your records.  15. Enter of NAME and the specified in permit retained to the	5	Table Control of the	a 1 100 1				And the state of t	gno	<b>5383</b>	ызн с	103					600	MIXAM	(10-52) (10-61)	300	The state of the s
"AYERAGE" is normally arithmetic average (geometric average for bacterial parameters) of all sample measurements for each parameter obtained during "MONITORING PERIOD." (MOTE: to municipals with secondary treatment requirement, enter 30 day average of sample measurements under "AYERAGE" and enter maximum 7-day average of sample measurements obtained during monitoring peniod under "MAXIMUM".  6. Enters PERMIT REQUIREMENT" for each parameter under "QUANTITY" and "QUALITY" as specified in permit.  7. Under 'NO. EX" effire number of sample measurements during monitoring period that exceed maximum (and/or minimum or 7-day average as appropriate) permit requirement for each parameter. If none, enter "O".  8. Enters FREQUENCY OF ANALYSIS" both as "SAMPLE MEASUREMENT" (actual frequency of sampling and analysis) used during monitoring period) and as "PERMIT REQUIREMENT" specified in permit. (e.g., Enter "CONT." for continuous monitoring.  11/1" fol one day per week. "11/30" for one day per monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT" (actual sample type used during monitoring period) and	one year	THE CORRESS CATA CONTROL OF THE CORRESPONDING TO THE SHAME AND CORRESPONDING CORRESPON	FURST LED VERBING BAN			The second secon									Account of the second of the s		X.C	roy sivie		ARBERT STREET
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PERMITTEE NAME ADDRESS (Include Facility Name/Location (fd)[Grent)  NAME 60 / FRS FNDUSTRIES TNE ADDRESS 7540 NW ST HELENS RD  CORTLAND OR 97210				R. 10	ARGE MO	NITORI	ING REPO	N SYSTEM (NPDES) RT (DMR) (17-19)	,			Form Appr OMB No. 2 Expires 3-3	2040-0004
FACILITY NO RTH W.	EST PLA	NT	FROM	YEAR 91	MONI	ITORIN	G PERIO	D DAY 9 30	3077- == 47430 NOTE: Read instru	uctions hefo	oza con	ooleting th	ic form
PARAMETER		(3 Card Only) QU (46-53)	JANTITY OR (54-61)	LOADIN	(22-23) (24 IG	(4 Card		(46-53)		ICHOIIS DC.		FREQUENCY	SAM
(32-37)		AVERAGE	MAXIM	1UM	UNITS	MIN	IIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)		(40)
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FLOW.	PERMIT REQUIREMENT		11/2		GRO								
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

flow

45800

WW # 24 45 800 = 90000 - 30= 300

Temp

78

78 = 100 + z = 28

Ph.

6.4

6.1 = 12.5:-2 = 6.25

out of glasse

0.3-

0.5-= 1:2= 0.5-

phrobs.

0.14

0.12 = 0.26 = 2 = 0.13



Report Date: August 28, 1991 Job#: WG-910820AM-2 PO#: VERBAL JOHN

Attention: John Oxford Koppers Industry
7540 NW St. Helens Rd.
Portland, OR 97210

SAMPLE INFORMATION:

Date Samples Were Received By Laboratory: 08/20/91

Lab No.	Field Identification	Sample Matrix	Date	Time
			<del>-</del>	
1	W-W-T-3	Waste Water	08-20-91	14:45
2	W - W - T - 4	Waste Water	08-20-91	14:45

## ANALYTICAL RESULTS:

PARAMETER	METHOD	DETECTION LIMITS	SAMPLE #1 RESULTS	SAMPLE #2 RESULTS
Oil & Grease	EPA 413.2	0.5	trace, < 0.5	0.5
Total Phenols	EPA 420.1	0.05	0.14	0.12

Results expressed as mg/L unless otherwise noted.

The less than "<" symbol means none detected at or above the indicated value and represents the detection limit for the method.

Renee Chauvin, Technical Director

RJC/mlh

This report is for the sole and exclusive use of the above-named client. Samples are retained 15 days from the report date, or until holding time expires. Results pertain only to samples submitted.

AUG 3 0 1991 KOPPERS INDS., INC.

PORTLAND COFFEY LABORATORIES, INC.

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8-20-91 W-W- T-4 Ph 6.1 Water Temp-78

# Koppers002269

# **COFFEY LABORATORIES INC.**

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



# **COFFEY LABORATORIES - PENDLETON BRANCH**

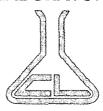
287 S.E. FIRST, PENDLETON, OR 97801\* (503) 276-0385

## **CHAIN OF CUSTODY**

PROJECT #:	PROJECT NAM			P.O. #:	,		of ASE PRINT (	PAGES OR TYPE	FOR LABORA	TORY USE ONLY
COMPANY NAME: REPORT ATTENTIO	Kopper- DN: John	S IND. I Ox Fora	NC.			.,			JOB #: ( G-91	0820-AM2
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FIELD IDENTIFICAT	ION:	LAE LOC		COLLEC DATE	CTION TIME	MEDIA	** ***	ANALYSIS	REQUESTED	ANALYSIS REMARKS
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SAMPLE REMARKS		· //			Li	EVEL 1	2 0 - 3	E	XPRESS UPS MAIL	CXX GREY TAXI LAB
WHITE COPY - COF	FEY LABORATOR	RIES						<b>.</b>	F	PINK COPY - CLIENTS COPY

SHADED AREA FOR LABORATORY USE ONLY
CHAIN OF CUSTODY INSTRUCTIONS ON BACK OF PINK COPY

## COFFEY LABORATORIES. INC.



## CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

**PROJECT NUMBER** — Applies only to samples submitted by the company. This data is provided at the companies discretion.

**PROJECT NAME** — Your company's project name. This data is provided at the companies discretion.

**COMPANY NAME** — Name of the Company or individual requesting the analysis from Coffey Laboratories, Inc.

**REPORT ATTENTION** — Name of the person who receives the laboratory report.

**SAMPLE COLLECTED BY** — The person who took the sample signs this box and gives his/her title.

FIELD ID — A short description of the sample point (For example: "Effluent from sand filter"). This description will appear on the report. Use one line per sample bottle.

**COLLECTION DATE** — The date on which the sample(s) was/were collected.

**COLLECTION TIME** — The time at which the sample(s) was/were collected.

**MEDIA** — This is a description of the sample matrix.

**ANALYSIS REQUESTED** — Make one column for each parameter or group of parameters associated to a bottle.

**FOR LAB USE ONLY** — Do not mark in this area (Laboratory location & ID). All shaded areas are for laboratory use only. Please do not write in these areas.

**REMARKS** — Record any comments about each sample on the same line as the sample description, e.g., "Wastewater contains VOCs".

**RELINQUISHED BY** — The sampler signs this box when he/she gives the sample to someone else, and then fills in the date and time they left his possession.

**RECEIVED BY** — The person who receives the samples signs here and fills in the date and time received. The date and time should be the same as the last one unless the samples were shipped.

**SAMPLE REMARKS** — Record any comments regarding the sample(s) as a whole or information pertinent to the sample.

**SAMPLES SHIPPED VIA** — How the samples are being shipped to the laboratory, e.g., "UPS".

TYPED OR PRINTED	Y VIOLATIO			t of between 6 month. ents here)	s and 5 years.)		OFFIC	ER OR AUTHO	RIZED AGENT	CODE	NUMBER	YEAR	МО	DAY
PLANT MANAGER		NIFICANT THE POSS 33 U.S.C §	PENALTIES FOR SIBILITY OF FINE 1319. (Penalties	COMPLETE, I AM SUBMITTING FAL AND IMPRISONMEN under these statutes	SE INFORMA IT. SEE 18 U. may include l	TION, INCLUDING S.C § 1001 AND	SIGNAT	JBE OF PRINCI	PAL EXECUTIVE		286-368	1 91	9	11
JOHN A OXFORD		ON MY I	INQUIRY OF THOS	SE INDIVIDUALS IM TION, I BELIEVE 1	IMEDIATELY RI	ESPONSIBLE FOR ED INFORMATION	Per		2016/	1				
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER			OF LAW THAT I					<u> </u>	TE	LEPHONE		ATE	<u> </u>
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	PERM REQUIRE													
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

(4 Card Only)

(38-45)

MINIMUM

DAY

(17-19)

DISCHARGE NUMBER

DAY

31

(46-53)

AVERAGE

QUALITY OR CONCENTRATION

YEAR MO

8

(26-27) (28-29) (30-31)

91

3077-3

(54-61)

MAXIMUM

12-161

8

(20-21) (22-23) (24-25)

UNITS

OR-100077-9

YEAR

91

FROM

QUANTITY OR LOADING

(54-61)

MAXIMUM

(3 Card Only)

SAMPLE MEASUREMENT

PERMIT REQUIREMENT (46-53)

AVERAGE

NO FLOW

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

PARAMETER

(32-37)

FLOW

ADDRESS

FACILITY

LOCATION

MAME KOPPERS INDUSTRIES INC

7540 NW ST HELENS RD

PORTLAND OR 97210

NORTHWEST PLANT

MULTNOMAH COUNTY

Form Approved OMB No. 2040-0004

Expires 3-31-88

FREQUENCY

OF ANALYSIS

(64-68)

SAMPLE

TYPE

(69-70)

47430 NOTE: Read instructions before completing this form.

UNITS

NO.

EX

(62-63)

## **GENERAL INSTRUCTIONS**

- 1. If form has been partially completed by preprinting, disregard instructions directed at entry of that information already preprinted.
- 2. Enter "PERMITTEE NAME/MAILING ADDRESS (and facility name/location, if different)," "PERMIT NUMBER," and "DISCHARGE NUMBER" where indicated. (A separate form is required for each discharge.)
- 3. Enter dates beginning and ending "MONITORING PERIOD" covered by form where indicated.
- 4. Enter each "PARAMETER" as specified in monitoring requirements of permit.
- 5. Enter "SAMPLE MEASUREMENT" data for each parameter under "QUANTITY" and "QUALITY" in units specified in permit. 'AVERAGE" is normally arithmetic average (geometric average for bacterial parameters) of all sample measurements for each parameter obtained during "MONITORING PERIOD." "MAXIMUM" and "MINIMUM" are normally extreme high and low measurements: obtained during "MONITORING PERIOD." (NOTE: to municipals with secondary treatment requirement, enter 30-day average of sample measurements under "AVERAGE" and enter maximum 7-day average of sample measurements obtained during monitoring period under "MAXIMUM".
- 6. Enter "PERMIT REQUIREMENT" for each parameter under "QUANTITY" and "QUALITY" as specified in permit.
- 7. Under "NO. EX" enter number of sample measurements during monitoring period that exceed maximum (and/or minimum or 7-day average as appropriate) permit requirement for each parameter. If none, enter "O".
- 8. Enter "FREQUENCY OF ANALYSIS" both as "SAMPLE MEASUREMENT" (actual frequency of sampling and analysis used during monitoring period) and as 'PERMIT REQUIREMENT' specified in permit. (e.g., Enter "CONT." for continuous monitoring. "1/7." for one day per week. "1/30" for one day per month. "1/90" for one day per quarter, etc.)
- 9. Enter 'SAMPLE TYPE" both as "SAMPLE MEASUREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT." (e.g., Enter "GRAB" for individual sample. "24HC" for 24-hour composite. "N/A" for continuous monitoring, etc.)

- 10. WHERE VIOLATIONS OF PERMIT REQUIREMENTS ARE REPORTED, ATTACH A BRIEF EXPLANATION TO DESCRIBE CAUSE AND CORRECTIVE ACTIONS TAKEN. REFERENCE EACH VIOLATION BY DATE.
- 11. If 'no discharge" occurs during monitoring period, enter "NO DISCHARGE" across form in place of data entry.
- Enter "NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER" with "SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT." "TELEPHONE NUMBER" and "DATE" at bottom of form.
- 13. Mail signed Report to Office(s) by date(s) specified in permit. Retain copy for your records.
- 14. More detailed instructions for use of this DISCHARGE MONITORING REPORT (DMR) form may be obtained from Office(s) specified in permit.

## **LEGAL NOTICE**

This report is required by law (33 U.S.C. 1318: 40 C.F.R. 125.27). Failure to report or failure to report truthfully can result in civil penalties not

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(3 Card Only)

SAMPLE MEASUREMENT

PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT

MEABUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT

REQUIREMENT SAMPLE MEASUREMENT PERMIT

(46-53)

AVERAGE

Form Approved OMB No. 2040-0004 Expires 3-31-88 NOTE: Read instructions before completing this form. FREQUENCY OF ANALYSIS SAMPLE TYPE EX UNITS (62-63) (64-68) (69-70)

PARAMETER

(32-37)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

12-161

PR-100077-9 PERMIT NUMBER

МО

(20-21) (22-23) (24-25)

UNITS

YEAR

QUANTITY OR LOADING

(54-61)

MAXIMUM

DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

TO

(4 Card Only)

(38-45)

MINIMUM

DAY

YEAR

126-27) 128-291

(17-19)

DISCHARGE NUMBER

MO

DAY

130-311

(46-53)

AVERAGE

QUALITY OR CONCENTRATION

(54-61)

MAXIMUM

DATE

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TELEPHONE

NUMBER

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PERMITTEE NAME/ADDRESS (Include

PARAMETER

(32-37)

TYPED OR PRINTED

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED UNTIL SUPPLY IS EXHAUSTED.

NAME -- KOPPERS INDUSTRIES INC

PORTLAND OR 97210

7540 NW ST HELENS RD

MHILTHOMAH COHNTY

Facility Name/Location if different)

ADDRESS

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

(38-45)

MINIMUM

DAY

YEAR

91

126-271 128-291

DISCHARGE NUMBER

DAY

/30-311

(4 Card Only) QUALITY OR CONCENTRATION

(46-53)

AVERAGE

OFFICER OR AUTHORIZED AGENT

3077-3

(54-61)

MAXIMUM

12.161

PERMIT NUMBER

(20-21) (22-23) (24-25)

UNITS

OR-100077-9

YEAR

0.1

FROM

(54-61)

MAXIMUM

(3 Card Only); QUANTITY OR LOADING

(46-53)

AVERAGE

YEAR

NUMBER

OF

DATE

13

DAY

Form Approved

Expires 3-31-88

FREQUENCY

OF ANALYSIS

(64-68)

SAMPLE

TYPE

(69-70)

NOTE: Read instructions before completing this form.

UNITS

NO.

EX

(62-63)

OMB No. 2040-0004

#### **GENERAL INSTRUCTIONS**

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- 7. Under "NO. EX" enter number of sample measurements during monitoring period that exceed maximum (and/or minimum or 7-day average as appropriate) permit requirement for each parameter. If none, enter "0".
- 8. Enter. "FREQUENCY OF ANALYSIS" both as "SAMPLE MEASUREMENT" (actual frequency of sampling and analysis used during monitoring period) and as "PERMIT REQUIREMENT" specified in permit. (e.g., Enter "CONT." for continuous monitoring. "1/7" for one day per week. "1/30" for one day per month. "1/90" for one day per quarter, etc.)
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### **LEGAL NOTICE**

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	(32-37)			AVERAGE	MAXIMUM	UNITS	
	FLOW	SAMPLE MEASUREM		6000			
		PERMIT REQUIREME			N/A	GPD	
	TEMP	SAMPLE MEASUREMI					
		PERMIT REQUIREME					
	PH	SAMPLE MEASUREM					
		PERMIT REQUIREME	NT				
	OIL & GREASE	SAMPLE MEASUREM					
		PERMIT REQUIREME					
	PHENOLS	SAMPLE MEASUREMI					
		PERMIT REQUIREME	NT				
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pp	NAME/TITLE PRINCIPAL EXECUTIVE	A/	ND AM	FAMILIAR WITH THE I	F LAW THAT I HAVE F	D HEREIN: AN	D
ers	JOHN A OXFORD	0	BTAININ	IG THE INFORMATION	INDIVIDUALS IMMEDIATE	BMITTED INFO	RN
Koppers002276	PLANT MANAGER	NI.	FICANT	PENALTIES FOR SI	MPLETE. I AM AWARE UBMITTING FALSE INF D IMPRISONMENT. SEE	ORMATION, IN	4CL
22	TYPED OR PRINTED	3:	3 U.S.C	§ 1319. (Penalties und	er these statutes may in hetween 6 months and 5 y	clude fines up	
76	COMMENT AND EXPLANATION OF AN	Y VIOLATIONS	3 (Ref	erence all attachments	here)		

	DISCHARGE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (DMR)
(2-16)	(17-19)

(2-16) OR-100077-9 PERMIT NUMBER DISCHARGE NUMBER

FROM

Form Approved OMB No. 2040-0004 Expires 3-31-88

MONITORING PERIOD 3077-J YEAR DAY YEAR DAY 47430

			(20-21)	(22-23) (24	-25) (26-27)	(28-29) (30-31)	NOTE: Read inst	ructions befo	re com	pleting this	; torm.
PARAMETER		(3 Card Only) QUA (46-53)	ANTITY OR LOADII (54-61)	NG	(4 Card Only) (38-45)	QUALITY OR CON (46-53)	CENTRATION (54-61)		NO.	FREQUENCY OF	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
FLOW	SAMPLE MEASUREMENT	6000							N/	4/ <sub>30</sub>	EST
	PERMIT REQUIREMENT		N/A	GPD							
TEMP	SAMPLE MEASUREMENT				58	59.28	61	o <sub>F</sub>	:6	<sup>4</sup> /30	GRAB
	PERMIT REQUIREMENT						110				
PH	SAMPLE MEASUREMENT		,		6.1	6.475	6.8		0	4/ <sub>30</sub>	GRAB
	PERMIT REQUIREMENT				6.0		9.0	su			
OIL & GREASE	SAMPLE MEASUREMENT				0.7	1.0	1.2	MG/	0	4/30	GRAB
	PERMIT REQUIREMENT					10	15	Ĺ,			
PHENOLS	SAMPLE MEASUREMENT				0.14	0.2475	0.44	MG/L	0	4/30	GRAB
	PERMIT REQUIREMENT					0.5	0.7	(PPM)			
	SAMPLE MEASUREMENT					·				,	
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE	AND AM	FAMILIAR WITH THE	F LAW THAT I HAVE	ED HEREIN; AN	ND BASED	1	// .	TELEPHONI	<u>.</u>	DA	TE
JOHN A OXFORD PLANT MANAGER	OBTAINII IS TRUE NIFICAN' THE PO	NG THE INFORMATION E ACCURATE AND CO T PENALTIES FOR S SSIBILITY OF FINE AN	INDIVIDUALS IMMEDIAT N. I BELIEVE THE SU IMPLETE. I AM AWARE UBMITTING FALSE IN D IMPRISONMENT. SEE	JBMITTED INFO THAT THERE FORMATION, H 18 U.S.C § 1	ORMATION ARE SIGNICLUDING	John G L	Hand EXECUTIVE	503 286-	-368	1 91 7	11
TYPED OR PRINTED			ler these statutes may in between 6 months and 5	nciude fines up years.)	to \$10,000   •	CER OR AUTHORIZ		REA NUME	ER	YEAR M	O DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

FACILITY N.W. PLANT

LOCATION MULTNOMAH COUNTY

MAME KOPPERS INDUSTRIES INC

ADDRESS 7540 NW ST HELENS RD

PORTLAND OR 97210

#### **GENERAL INSTRUCTIONS**

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(FOLD HERE FIRST)

- 10. WHERE VIOLATIONS OF PERMIT REQUIREMENTS ARE REPORTED, ATTACH A BRIEF EXPLANATION TO DESCRIBE CAUSE AND CORRECTIVE ACTIONS TAKEN. REFERENCE EACH VIOLATION BY DATE.
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PERMITTEE NAME / ADDRESS (Inci Facility Name / Location if different) NAME / PLL:	ude colves on it bel	m by Rse	OR -	ARGE MOI (2-16) 1660 77 IT NUMBER	DISC	(17-19) HARGE NUMBER	3077- 🕸			Form Appr OMB No. 2 Expires 3-3	2040-0004
LOCATION Mully	plant com	<b>与</b>	FROM 91 (20:21)	MONI 6 / / / / / / / / / / / / / / / / / /	10 9/	MO DAY	17430 IOTE: Read instr	uctions befo	re cor	npleting thi	is form.
PARAMETER		(3 Card Only) QU (46-53)	ANTITY OR LOADIN (54-61)		(4 Card Only) (38-45)	QUALITY OR CONG	CENTRATION (54-61)		NO.	FREQUENCY	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS	(69-70)
	SAMPLE MEASUREMENT	6000							P	4/30	Est,
Flow	PERMIT REQUIREMENT		N/p	GRD							
	SAMPLE MEASUREMENT				5^8	59.25	61		0	30	CRAM
Verip	PERMIT REQUIREMENT						110	F			
01	SAMPLE MEASUREMENT				611	6.470-	6.8		0	4/30	GRAB
Ph.	PERMIT REQUIREMENT				6.0		9.0	su			
	SAMPLE MEASUREMENT		,		0.7	1.0	1.2	m9/	0	4/30	GRAB
Die & grene Physis.	PERMIT REQUIREMENT					, a	10-	12			7 11 - 2
	SAMPLE MEASUREMENT			ĺ	0-14	0.2475	6.44	m9/4	d	1/34	GRAD
Physis.	PERMIT REQUIREMENT				•	0.5	0.7	(PPM)			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT									•	
	PERMIT REQUIREMENT										·
NAME/TITLE PRINCIPAL EXECUTI	AND AM	FAMILIAR WITH THE I	F LAW THAT I HAVE P	D HEREIN: AND	BASED			TELEPHONE		DA	TE
John A Office.	OBTAININ IS TRUE.	G THE INFORMATION ACCURATE AND COR	INDIVIDUALS IMMEDIATE 1. I BELIEVE THE SUB MPLETE I AM AWARE T JBMITTING FALSE INFO	MITTED INFOR	RMATION RE SIG.						
TYPED OR PRINTED	THE POS	SIBILITY OF FINE AND	o imprisonment, see or these statutes may into between 6 months and 5 years.	18 U.S.C. § 10 Jude fines up to	OI AND SIGNATU	RE OF PRINCIPAL	180			91 7 YEAR MO	DAY
COMMENT AND EXPLANATION OF				<del></del>			COL	JE I			

Filou.

WWI WWZ WW3 WW4 45,000 45000 45000 45000 = 180,000 - 30,6000

Temp.

60 61 58 58 = 237 = 4 = 59.25

Ph.

6.1 6.3 6.8 6.7 = 25.9-4=6.470

out gure.

0.7.

1.2

1.2 0.9= 4.0 =4 =1.0

Phroe.

0.22 0.44 0.19 8.14 = 0.49 -4=0,2475



Attention: John Oxford

Koppers Industry

7540 N.W. St. Helens Road

Portland, OR 97210

June 27, 1991

Log #WG910620AG-2

Samples Collected: 06/20/91, 1345 hrs.

Samples Received: 06/20/91

		DETECTION	W-W-T-1	W-W-T-2
PARAMETER	METHOD	LIMITS	RESULTS	RESULTS
	***	this inch tens was type that tens top 1876.		
Oil & Grease	EPA 413.2	0.5	0.7	1.2
Total Phenols	EPA 420.1	0.05	0.22	0.44

Results expressed as mg/L unless otherwise noted.

Sincerely,

Victor A. Perry,

Quality Assurance

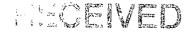
Sincerely,

Kenee Chauvin.

Technical Director

RJC/daj

This report is for the sole and exclusive use of the client. Samples are retained a maximum of 15 days from the report date, or until the maximum holding time expires.



1 1991

KOPPERS INDS., INC. PORTLAND, OR

6-20-91 W-W-T-1 Ph 6.1

water Temp.

6-20-91 W-W-T-2 Ph 6.3

water Temp.

# **COFFEY LABORATORIES INC.**

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



## **COFFEY LABORATORIES - PENDLETON BRANCH**

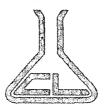
287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

## **CHAIN OF CUSTODY**

PROJECT #:	PROJECT NAME:		P.O. #:			of PAG ASE PRINT OR TYPE	I ON EMBOR	ATORY USE ONLY
COMPANY NAME: REPORT ATTENTION	Koppers I ON: John C	ND. XFord					JOB #: WI91	0620-AG2
SAMPLES COLLEC	CTED BY: HOFFM			٠			CUSTABBR: Lop	pers
FIELD IDENTIFICAT	TION:	LOC ID	COLLECT DATE	ION TIME	MEDIA	AN	NALYSIS REQUESTED	ANALYSIS REMARKS
W-W T	-/		6-20-911		1		Grease	
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J. 16 Ast. 1		· · · · · · · · · · · · · · · · · · ·		3				*
RELINQUISHED BY	/:		DATE/TIME	RECEIN	VED BY:		DATE/TIME	LAB USE:
RELINQUISHED BY	Storge Hoffer	an 6-20.	DATE/TIME	RECEI	VED BY LAB:	John &-	DATE/TIME	6/2019, 1535
SAMPLE REMARKS	, ,		•	LE	VEL 1	2 3 4	EXPRESS UPS MAIL	CXX GREY TAXI LAB
WHITE CORY COL	EEEV I ADODATODIES							DIMIL CODY OF TENTS CODY

PINK COPY - CLIENTS COPY

## COFFEY LABORATORIES. INC.



## CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

**PROJECT NUMBER** — Applies only to samples submitted by the company. This data is provided at the companies discretion.

**PROJECT NAME** — Your company's project name. This data is provided at the companies discretion.

**COMPANY NAME** — Name of the Company or individual requesting the analysis from Coffey Laboratories, Inc.

**REPORT ATTENTION** — Name of the person who receives the laboratory report.

**SAMPLE COLLECTED BY** — The person who took the sample signs this box and gives his/her title.

**FIELD ID** — A short description of the sample point (For example: "Effluent from sand filter"). This description will appear on the report. Use one line per sample bottle.

**COLLECTION DATE** — The date on which the sample(s) was/were collected.

**COLLECTION TIME** — The time at which the sample(s) was/were collected.

**MEDIA** — This is a description of the sample matrix.

**ANALYSIS REQUESTED** — Make one column for each parameter or group of parameters associated to a bottle.

**FOR LAB USE ONLY** — Do not mark in this area (Laboratory location & ID). All shaded areas are for laboratory use only. Please do not write in these areas.

**REMARKS** — Record any comments about each sample on the same line as the sample description, e.g., "Wastewater contains VOCs".

**RELINQUISHED BY** — The sampler signs this box when he/she gives the sample to someone else, and then fills in the date and time they left his possession.

**RECEIVED BY** — The person who receives the samples signs here and fills in the date and time received. The date and time should be the same as the last one unless the samples were shipped.

**SAMPLE REMARKS** — Record any comments regarding the sample(s) as a whole or information pertinent to the sample.

SAMPLES SMIPPED VIA — How the samples are being shipped to the laboratory, e.g., "UPS".



May 21, 1991 Log #WG910509-AC2 PO #Verbal-John

Attention: John Oxford

Koppers Industry 7540 NW St. Helens Road Portland, OR 97210

Samples Collected: 05/09/91, 1445 hrs.

Samples Received: 05/09/91 Sample ID: #1 - W-W-T-3 #2 - W-W-T-4

PARAMETER	METHOD	DETECTION LIMITS	SAMPLE RESULTS	SAMPLE RESULTS
Oil & Grease	EPA 413.2	Q.5	1.2	0.9
Total Phenols	EPA 420.1	0.05	<b>Q.</b> 19	0.14

Results expressed as mg/L unless otherwise noted.

Sincerely.

Victor A. Perry,

Quality Assurance

Sincerely,

Renee Chauvin.

Technical Director

RJC/lws

This report is for the sole and exclusive use of the client. Samples are retained a maximum of 15 days from the report date, or until the maximum holding time expires.

AFCEWED

MAY 23 1991

KOPPERS INDS. INC. PORTLAND, OR

**COFFEY LABORATORIES, INC.** 

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452

## COFFEY LABORATORIES INC.

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



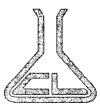
## **COFFEY LABORATORIES - PENDLETON BRANCH**

287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

# **CHAIN OF CUSTODY**

PROJECT #:	PROJECT NAME:		P.O. #:		PAGE _	of	PAGES	FOR LABORATO	RY USE ONLY
					PLE	ASE PRINT C	OR TYPE		
COMPANY NAME:	Koppers 7	ND-	1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				<u> </u>	JOB #:	palation of the second
REPORT ATTENTIO	ON: Take Ox	Ford	`* •	•				JOB#: :(W. G. A. 10.50	7-ACZ
SAMPLES COLLEC	TED BY:				·			CUSTABBRL > * 4 1 1 4 4 4	10 Marie 1984 1985 1985
Geor	TOHN OXI	maN		No.				Kappers	
FIELD IDENTIFICAT	ION:	LAB # : #:	COLLI	ECTION					ANALYSIS
ONE LINE PER SAMPLE	CONTAINER	LOC ID	DATE	TIME	MEDIA		ANALY	SIS REQUESTED	REMARKS
W-W- T-	3		5-9-91	2:45 PM			4 Gre	ease	
W-W- 7	r-3	2.725	, ,	17			endls		
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RELINQUISHED BY	Garage Hay	An an	DATE/TIME	E RECEIV	/ED BY LAB:	July ?	Ily	DATE/TIME	719/1526
SAMPLE REMARKS	•			LE	VEL → 1 / - }	1 <sub>2</sub> . 3	* 4	EXPRESS UPS MAIL A	X GREY, TAXI LAB
WHITE COPY - COE	FFY LABORATORIES	,						PINI	CODY CHENTS CODY

## COFFEY LABORATORIES, INC.



# CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

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**REMARKS** — Record any comments about each sample on the same line as the sample description, e.g., "Wastewater contains VOCs".

RELINQUISHED BY — The sampler signs this box when he/she gives the sample to someone else, and then fills in the date and time they left his possession.

**RECEIVED BY** — The person who receives the samples signs here and fills in the date and time received. The date and time should be the same as the last one unless the samples were shipped.

SAMPLE REMARKS — Record any comments regarding the sample(s) as a whole or information pertinent to the sample.

SAMPLES SMIPPED VIA — How the samples are being shipped to the laboratory, e.g., "UPS".

5-9-91 W-W-T-3 Ph 6,8

water Temp
58°F

5-9-91 W-W-T-4 Ph 6.7

water Temp.
58° F

THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C \$ 1001 AND

33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

12.161

OR-10007799

PERMIT NUMBER

(20-21) (22-23) (24-25)

UNITS

YEAR

91

QUANTITY OR LOADING

(54-61)

MUMIXAM

Card Only)

(46-53)

AVERAGE

CAMBLE MEASUREMENT DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

TΩ

(4 Card Only)

(38-45)

MINIMUM

YEAR

91

DAY

(17-19)

DISCHARGE NUMBER

6

(26-27) (28-29) (30-31)

DAY

 $\mathsf{T}$ 

(46-53)

AVERAGE

QUALITY OR CONCENTRATION

3077-3 47430

(54-61)

MAXIMUM

Form Approved

Expires 3-31-88

FREQUENCY

OF ANALYSIS

(64-68)

DATE

6

MO

10

DAY

91

YEAR

NUMBER

EX

62-63)

SAMPLE

TYPE

(69-70)

NOTE: Read instructions before completing this form.

UNITS

OMB No. 2040-0004

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PLANT MANAGER

TYPED OR PRINTED

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED UNTIL SUPPLY IS EXHAUSTED.

PERMITTEE NAME/ADDRESS (Include

FACILITY N.W. PLANT

PARAMETER

(32-37)

223800A

LOCATION

Facility Name Location if different NDUSTRIES INC

PORTLAND OR 97210

MULTNOMAH COUNTY

7540 NW ST HELENS RD

SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

#### GENERAL INSTRUCTIONS

- 1. If form has been partially completed by preprinting, disregard instructions directed at entry of that information already preprinted.
- 2. Enter "PERMITTEE NAME/MAILING ADDRESS (and facility name/location, if different)," "PERMIT NUMBER," and "DISCHARGE NUMBER" where indicated. (A separate form is required for each discharge.)
- 3. Enter dates beginning and ending "MONITORING PERIOD" covered by form where indicated.
- 4. Enter each "PARAMETER" as specified in monitoring requirements of permit.
- 5. Enter "SAMPLE MEASUREMENT" data for each parameter under "QUANTITY" and "QUALITY" in units specified in permit. "AVERAGE" is normally arithmetic average (geometric average for bacterial parameters) of all sample measurements for each parameter obtained during "MONITORING PERIOD." "MAXIMUM" and "MINIMUM" are normally extreme high and low measurements obtained during "MONITORING PERIOD." (NOTE: to municipals with secondary treatment requirement, enter 30-day average of sample measurements under "AVERAGE" and enter maximum 7-day average of sample measurements obtained during monitoring period under "MAXİMUM".
- 6. Enter "PERMIT REQUIREMENT" for each parameter under "QUANTITY" and "QUALITY" as specified in permit.
- Under "NO. EX" enter number of sample measurements during monitoring period that exceed maximum (and/or minimum or 7-day average as appropriate) permit requirement for each parameter. If none, enter "0".
- 8. Enter "FREQUENCY OF ANALYSIS" both as "SAMPLE MEASUREMENT" (actual frequency of sampling and analysis used during monitoring period) and as 'PERMIT REQUIREMENT' specified in permit (e.g., Enter "CONT." for continuous monitoring. "1/7" for one day per week. "1/30" for one day per month. "1/90" for one day per quarter, etc.)
- Enter 'SAMPLE TYPE" both as "SAMPLE MEASUREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT." (e.g., Enter "GRAB" for individual sample. "24HC" for 24-hour composite. "N/A" for continuous. monitoring, etc.)

- 10. WHERE VIOLATIONS OF PERMIT REQUIREMENTS ARE REPORTED, ATTACH A BRIEF EXPLANATION TO DESCRIBE CAUSE AND CORRECTIVE ACTIONS TAKEN. REFERENCE EACH VIOLATION BY DATE.
- If 'no discharge" occurs during monitoring period, enter "NO DISCHARGE" across form in place of data entry.
   Enter "NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER" with "SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT." "TELEPHONE NUMBER" and "DATE" at bottom of form.
- Mail signed Report to Office(s) by date(s) specified in permit. Retain copy for your records.
- More detailed instructions for use of this DISCHARGE MONITORING REPORT (DMR) form may be obtained from Office(s) specified in permit.

#### **LEGAL NOTICE**

This report is required by law (33 U.S.C. 1318: 40 C.F.R. 125.27). Failure to report or failure to report truthfully can result in civil penalties not to exceed \$10,000 per day of violation; or in criminal penalties not to exceed \$25,000 per day of violation, or by imprisonment for not more than one year, or by both.

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PLACE																		

POLD HERE THIRD

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

(4 Card Only)

(38-45)

MINIMUM

YEAR

9.1

126-271

DAY

(17-19)

DISCHARGE NUMBER

DAY

(30-31)

(46-53)

AVERAGE

QUALITY OR CONCENTRATION

MO

128-291

=

3077-J

(54-61)

MAXIMUM

47430

12-161

OR - 100077-

(20-21) (22-23) (24-25)

UNITS

YEAR

**a** 1

QUANTITY OR LOADING

(54-61)

MAXIMUM

(3 Card Only)

6000

SAMPLE MEASUREMENT (46-53)

AVERAGE

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

PARAMETER

(32-37)

FACILITY

LOCATION

FLOW

NAME - ROPPERS INDUSTRIES INC

PORTLAND OR 97210

TVAJEWY

MULTNOMAH COUNTY

Form Approved

Expires 3-31-88

FREQUENCY

OF ANALYSIS

(64-68)

EX

62-63

SAMPLE

(69-70)

NOTE: Read instructions before completing this form.

UNITS

OMB No. 2040-0004

#### **GENERAL INSTRUCTIONS**

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- 14. More detailed instructions for use of this DISCHARGE MONITORING REPORT (DMR) form may be obtained from Office(s) specified in permit.

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PERMITTEE NAME (ADDRESS (Include Facility Name) Location of different)  NAME LOPERS IN  ADDRESS 25 40 N N  PORTLAND	DUSTRIES	INE IRD	PU-10	ARGE MO (2-16) 0 0 77-	NITORING RE	(17-19)	3077-2	7		Form Appr OMB No. 2 Expires 3-3	2040-0004
FACILITY NWP	LANT		-		TORING PER	- TOD	47430				
LOCATION MULTNO	mall e	UNTY	FROM YEAR	4 1	TO YEAF	3- /	NOTE: Read in:		re com	nleting th	is form
			(20-21) ANTITY OR LOADIN	(22-23) (24 IG	(4 Card Only)	() (28-29) (30-31) QUALITY OR CON (46-53)	ICENTRATION	structions bero	7		
PARAMETER (32-37)		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	SAMPLE MEASUREMENT	6000							NA	4/30	4-50
Flow.	PERMIT REQUIREMENT		N/P	ه م							
	SAMPLE MEASUREMENT				5^2	5-4.25	5-6	ی	0	4/30	GRAE
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- 1	SAMPLE MEASUREMENT				6.3	6.475	6.7		U	4/30	CRAL
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Die + Mune	PERMIT REQUIREMENT					10	/3 '				
	SAMPLE MEASUREMENT				0.15	- 0.1820-	0.22	30/2	6	4/30	G-RAB
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NAME/TITLE PRINCIPAL EXECUTIVE	AND AM	FAMILIAR WITH THE I	F LAW THAT I HAVE P NFORMATION SUBMITTED	D HEREIN; AN	D BASED	· ·		TELEPHONE		DA	TE
JOHNA OXFORD	OBTAINI	IG THE INFORMATION	INDIVIDUALS IMMEDIATEI I, I BELIEVE THE SUB MPLETE. I AM AWARE T UBMITTING FALSE INFO	MITTED INFO	RMATION ARE SIG						
PLANT MANA		SSIBILITY OF FINE AND § 1319. (Penalties und	D IMPRISONMENT, SEE 1 or these statutes may inc	18 U.S.C § 10 lude fines up l	01 AND SIGNA	TURE OF PRINCIPAL		73 286-3		91 5	
TYPED OR PRINTED			hetween 6 months and 5 ye here)	ark.)	OFF	FICER OR AUTHORIZI		ODE NUMB	ER	YEAR M	O DAY

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ww4 wwz ww3 WWI FLOW 45,000 45000 = 180100 45,000 45.010 - 30 = 6,000 56 56 53 TEMP 62 = 217 - 4= 54.21-Ph 6.5 6.7 6.3 6,4= 25.9-4 6.478-Die x 0.4 0.5 = 2.5 - 4= grin. 0.8 0.8 0.625 Ployal. 0.20 0.15-0.16 = 0.73 = 4=

0,1825



April 30, 1991 Log #A910416-AH2 PO: Verbal John

Attention: John Oxford

Koppers Industry

7540 NW St. Helens Rd. Portland, OR 97210-3663

Samples Collected: 04/16/91, 1400 hrs.

Samples Received: 04/16/91

		DETECTION	W.W. TK#1	W.W. TK#2
PARAMETER	METHOD	LIMITS	RESULTS	RESULTS
Oil & Grease	EPA 413.2	0.5	0.8	0.8
Total Phenols	EPA 420.1	0.05	0.15	Q.16

Results expressed as mg/L unless otherwise noted.

Sincerely,

Victor A. Perry, Quality Assurance Sincerely,

Renee Chauvin,

Technical Director

RJC/lws

This report is for the sole and exclusive use of the client. Samples are retained a maximum of 15 days from the report date, or until the maximum holding time expires.

CEIVED

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KOPPERS INDS...INC. PORTLAND, OR

**COFFEY LABORATORIES, INC.** 

W-W = 7-1 Ph = 6.5 Temp = 56°F

## **COFFEY LABORATORIES INC.**

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



#### **COFFEY LABORATORIES - PENDLETON BRANCH**

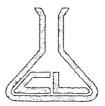
287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

#### **CHAIN OF CUSTODY**

PROJECT #:	PROJECT NAME:		P.O. #:		PAGE	of PAGES	FOR LAB	ORATORY USE ONLY	
					PLEA	ASE PRINT OR TYPE			
COMPANY NAME:	KOPPEI	20 IN	W). /	NO		<del></del>	JOB #:		of the second
REPORT ATTENTIO	IN: " ) " / " / " / / /		UT /				_ A910	416-AHQ	
SAMPLES COLLEC	TED BY:						CUSTABBR: , ,		
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FIELD IDENTIFICAT	ION:	LAB 📲 .	COLLEC	CTION				ANALYSIS	
ONE LINE PER SAMPLE	CONTAINER	LOC ID	DATE	TIME	MEDIA	ANALYSIS	REQUESTED	REMARKS	
W.W. TK	, # /	resident like		2 pm	WWater	OIL & GRE	ASE		
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WW. T	K. #2	2.5	(6)	1.6		DAENOL	EASE		
WW 7	K.#2	**************************************	(1	1.6	V	PAENOL			
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#### COFFEY LABORATORIES, INC.



#### CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

**PROJECT NUMBER** — Applies only to samples submitted by the company. This data is provided at the companies discretion.

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**SAMPLE REMARKS** — Record any comments regarding the sample(s) as a whole or information pertinent to the sample.

SAMPLES SHIPPED VIA — How the samples are being shipped to the laboratory, e.g., "UPS".



April 4, 1991 Log # A910328-AJ PO # John

Attention: John Oxford Koppers Industry
7540 NW St. Helens Rd.
Portland, OR 97210-3663

Samples Collected: 3/28/91, 1330 hrs Samples Received: 3/28/91

Sample ID: #1 W-W-T-3 #2 W-W-T-4

PARAMETER .	METHOD	DETECTION LIMITS	SAMPLE #1 RESULTS	SAMPLE #2 RESULTS
Oil & Grease	EPA 413.2	0.4	Q.4	0.5
Total Phenols	EPA 420.1	0.05	Q.2Q	0.22

Results expressed as mg/L unless otherwise noted.

Sincerely

Victor A. Perry, Quality Assurance

RJC/mlh

Sincerely.

Renee Chauvin, Technical Director

This report is for the sole and exclusive use of the client. Samples are retained a maximum of 15 days from the report date, or until the maximum holding time expires.

RECEIVED

APR 8 1991

KOPPERS INDS., INC. PORTLAND, OR

**COFFEY LABORATORIES, INC.** 

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452

#### COFFEY LABORATORIES INC.

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



#### **COFFEY LABORATORIES - PENDLETON BRANCH**

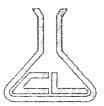
287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

### **CHAIN OF CUSTODY**

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SHADED AREA FOR LABORATORY USE ONLY
CHAIN OF CUSTODY INSTRUCTIONS ON BACK OF PINK COPY

#### COFFEY LABORATORIES. INC.



#### CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

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SAMPLES SMIPPED VIA — How the samples are being shipped to the laboratory, e.g., "UPS".

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### **COFFEY LABORATORIES INC.**

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



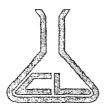
#### **COFFEY LABORATORIES - PENDLETON BRANCH**

287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

#### **CHAIN OF CUSTODY**

PROJECT #:	PROJECT NAME:		P.O. #:		PAGE _	of PAGES	FOR LABO	RÅTORY USE ONLY
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#### COFFEY LABORATORIES, INC.



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SAMPLES SHIPPED VIA — How the samples are being shipped to the laboratory, e.g., "UPS".



March 15, 1991 Log #A910308-BC2 PO: Verbal John

Attention: John Oxford Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

Samples Collected: 03/08/91, 1520 hrs.

Samples Received: 03/08/91

PARAMETER	METHOD	DETECTION LIMITS	W-W-T-1 RESULTS	W-W-T-2 RESULTS
011 & Grease	EPA 413.2	<b>Q.</b> 5	2.9	<b>Q.</b> 5
Total Phenols	EPA 420.1	0.05	0.08	0.08

Results expressed as mg/L unless otherwise noted.

Sincerely,

Victor A. Perry, Quality Assurance Sincerely,

Renee Chauvin, Technical Director

RJC/lws

This report is for the sole and exclusive use of the client. Samples are retained a maximum of 15 days from the report date, or until the maximum holding time expires.

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different) NAME KOPPERESINDUSTRIES INC ADDRESS 7540 NW ST HELENS RD PORTLAND OR 97210			NATIONAL POLLUTANT DISCHARGE EL DISCHARGE MONITORIN (2-16) OR-100077-9 PERMIT NUMBER			NG REP	GINATION SYSTEM (NPDES)  GREPORT (DMR) (17-19)  DISCHARGE NUMBER 3077-J			Of		OMB No. 2	Form Approved DMB No. 2040-0004 Expires 3-31-88			
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TOTAL NOTINGHAR	COONII			-		(22-23) (24-	*	91	(28-29)	(30-31)	NOTE: Read in	structi	ons befor	re com	pleting th	is form.
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

#### **GENERAL INSTRUCTIONS**

- 1. If form has been partially completed by preprinting, disregard instructions directed at entry of that information already preprinted.
- 2. Enter "PERMITTEE NAME/MAILING ADDRESS (and facility name/location, if different)," "PERMIT NUMBER," and "DISCHARGE NUMBER" where indicated. (A separate form is required for each discharge.)
- 3. Enter dates beginning and ending "MONITORING PERIOD" covered by form where indicated.
- 4. Enter each "PARAMETER" as specified in monitoring requirements of permit.
- 5. Enter "SAMPLE MEASUREMENT" data for each parameter under "QUANTITY" and "QUALITY" in units specified in permit.
  "AVERAGE" is normally arithmetic average (geometric average for bacterial parameters) of all sample measurements for each parameter obtained during "MONITORING PERIOD." "MAXIMUM" and "MINIMUM" are normally extreme high and low measurements obtained during "MONITORING PERIOD." (NOTE: to municipals with secondary treatment requirement, enter 30-day average of sample measurements under "AVERAGE" and enter maximum 7-day average of sample measurements obtained during monitoring period under "MAXIMUM".
- 6. Enter "PERMIT REQUIREMENT" for each parameter under "QUANTITY" and "QUALITY" as specified in permit.
- 7. Under "NO. EX" enter number of sample measurements during monitoring period that exceed maximum (and/or minimum or 7-day average as appropriate) permit requirement for each parameter. If none, enter "0".
- 8. Enter "FREQUENCY OF ANALYSIS" both as "SAMPLE MEASUREMENT" (actual frequency of sampling and analysis used during monitoring period) and as "PERMIT REQUIREMENT" specified in permit. (e.g., Enter "CONT." for continuous monitoring. "1/7" for one day per week. "1/30" for one day per month. "1/90" for one day per quarter, etc.)
- 9. Enter "SAMPLE TYPE" both as "SAMPLE MEASUREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT." (e.g., Enter "GRAB" for individual sample. "24HC" for 24-hour composite. "N/A" for continuous monitoring, etc.)

(FOLD HERE FIRST)

- 10. WHERE VIOLATIONS OF PERMIT REQUIREMENTS ARE REPORTED, ATTACH A BRIEF EXPLANATION TO DESCRIBE CAUSE AND CORRECTIVE ACTIONS TAKEN. REFERENCE EACH VIOLATION BY DATE.
- 11. If 'no discharge" occurs during monitoring period, enter "NO DISCHARGE" across form in place of data entry.
- 12. Enter "NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER" with "SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT." "TELEPHONE NUMBER" and "DATE" at bottom of form.
- 13. Mail signed Report to Office(s) by date(s) specified in permit. Retain copy for your records.
- 14. More detailed instructions for use of this DISCHARGE MONITORING REPORT (DMR) form may be obtained from Office(s) specified in permit.

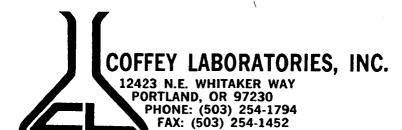
#### LEGAL NOTICE

This report is required by law (33 U.S.C. 1318: 40 C.F.R. 125.27). Failure to report or failure to report truthfully can result in civil penalties not to exceed \$10,000 per day of violation; or in criminal penalties not to exceed \$25,000 per day of violation, or by imprisonment for not more than one year, or by both.

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ril+grone	N/D	0.6	/. 6 /- 7	7 = 3.3 - 4	L= 0.825
Phrale.	6.11	0.14	0.19 0.1	3 = 0.63 ÷4.	-0.1575



February 20, 1991 Log #A910205-BE2 PO: Verbal John

Attention: John Oxford

Koppers Industry

7540 NW St. Helens Road Portland, OR 97210-3663

Samples Collected: 02/05/91, 1510 hrs.

Samples Received: 02/05/91

PARAMETER	METHOD	DETECTION LIMITS	W-W-T-1 RESULTS	W-W-T-2 RESULTS	UNITS
Oil & Grease Total Phenols	EPA 413.2 SM 420.1	0.5 0.05	ND Q.19	Q.6 Q.13	mg/L mg/L

ND means none detected at or above the detection limit listed.

SM means Standard Methods for the Examination of Water and Wastewater, 1985, 16th Edition.

Sincerely,

Sincerely,

Victor A. Perry, Quality Assurance Renee Chauvin, Technical Director

RJC/lws

This report is for the sole and exclusive use of the client. Samples are retained a maximum of 15 days from the report date, or until the maximum holding time expires.

FEB 2 2 1991

KOPPERS INDS., INC. PORTLAND, OR

florole: 0.19 0.13

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TO AND FROM

ARIZONA - CALIFORNIA - NEVADA - OREGON - WASHINGTON

FASTEST LTL SERVICE



(415) 826-8200



**SAN FRANCISCO** 

**DELIVERY BY NOON** 

2-5-91 w-w-T-1 Ph 6.4 water Temp. 54°F 2-5-91 W-W-T-2 Ph 6,2 water Temp- 570 F

# Koppers002322

## COFFEY LABORATORIES INC.

12423 N.E. WHITAKER WAY PORTLAND, OREGON 97230

# CHAIN OF CUSTODY

(503) 254-1794 FAX (503) 254-1452

PROJECT #:	PROJEC	CT NAME:		PAGEOFPAGE(S) PLEASE PRINT OR TYPE					FOR LABORATORY USE ONLY			
COMPANY NAME: Kor REPORT ATTENTION: Joh	N Oxt	NO. Ford	:						0205 BEZ			
SAMPLES COLLECTED BY:	*			•				CUSTABBR:	KOOPPES			
Geo. Hoffen	January .		COL	LECTION	1							
FIELD IDENTIFICATION:		LAB		I			ANALYSES		ANALYSIS			
ONE LINE PER SAMPLE CONTAINER		LOC ID	DATE	TIME	MEDIA	,	REQUESTED		REMARKS:			
W-W-T-1	19 	550	25/91	3:10 PM			1 + Grease					
W-W-T-1	<u> </u>		2/5/9/	, !			Phenols					
W-W-T-2		index of a law of	2/5/9/	11			+ Grease					
W-W-T-2			2/5/91	11			Phemals					
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SAMPLE REMARKS:					·	) : : (		EXPRESS UPS MAIL	CXX)GREY TAXI LAB			
WHITE COPY - COFFEY LAB	ORATORIES	- 1	14.	ì	7			PINK	COPY - CLIENT'S COPY			

SHADED AREA FOR LABORATORY USE ONLY
CHAIN OF CUSTODY INSTRUCTIONS ON BACK OF PINK COPY

#### COFFEY LABORATORIES, INC.

12423 N.E. WHITAKER WAY PORTLAND, OR 97230 PHONE: (503) 254-1794

FAX: (503) 254-1452

#### CHAIN OF CUSTODY INFORMATION / INSTRUCTION SHEET

PROJECT NUMBER -- Applies only to samples submitted by the company. This data is provided at the companies discretion.

PROJECT NAME -- Your company's project name. This data is provided at the company's discretion.

COMPANY NAME -- Name of the Company or individual requesting the analysis from Coffey Laboratories, Inc.

REPORT ATTENTION -- Name of the person who receives the laboratory report.

SAMPLE COLLECTED BY -- The person who took the sample signs this box and gives his/her title.

FIELD ID -- A short description of the sample point (For example, "Effluent from sand filter"). This description wil appear on the report. Use one line per sample bottle.

**COLLECTION DATE** -- The date on which the sample(s) was/were collected.

COLLECTION TIME -- The time at which the sample(s) was/we're collected.

MEDIA -- This is a description of the sample matrix.

ANALYSIS REQUESTED -- Make one column for each parameter or group of parameters associated to a bottle.

FOR LAB USE ONLY -- Do not mark in this area (Laboratory location & ID). All shaded areas are for laboratory. use only. Please do not write in these areas.

REMARKS -- Record any comments about each sample on the same line as the sample description, e.g., "Wastewater contains VOCs".

RELINQUISHED BY -- The sampler signs this box when he/she gives the sample to someone else, and then fills in the date and time they left his possession.

RECEIVED BY -- The person who receives the samples signs here and fills in the date and time received. The date and time should be the same as the last one unless the samples were shipped.

SAMPLE REMARKS -- Record any comments regarding the sample(s) as a whole or information pertinent to the

SAMPLES SHIPPED VIA -- How the samples are being shipped to the laboratory, e.g., "UPS".

(12/06/89)



FAX: (503) 254-1452

March 1, 1991 Log # A910222-AO2 PO # Verbai John

Attention: John Oxford

Koppers industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

Sample Collected: 2/22/91, 1430 hrs Sample Received: 2/22/91 Sample ID: #1 W-W-T-3 #2 W-W-T-4

PARAMETER	METHOD	DETECTION LIMIT	SAMPLE #1 RESULTS	SAMPLE #2 RESULTS
Oil & Grease Total Phenols	EPA 413.2 EPA 420.1	0.5 0.05	1.0	1.7

Results expressed as mg/L unless otherwise noted.

Sincerely,

Victor A. Perry, Quality Assurance

Sincerely,

Renee Chauvin, Technical Director

RJC/mlh

This report is for the sole and exclusive use of the client. Samples are retained a maximum of 15 days from the report date, or until the maximum holding time expires.

7 1991

KOFFERS INDS, INC. PORTLAND, OR

2-22-91 W-W-T-3 PH 6.8 water Temp-540F 2-22-91 W-W-T-4 Ph 6:2

water Temp.
54° F

### **COFFEY LABORATORIES INC.**

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



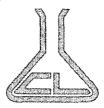
## **COFFEY LABORATORIES - PENDLETON BRANCH**

287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

### **CHAIN OF CUSTODY**

PROJECT #: PROJECT NAME:		P.O. #:	·	PAGE _ PLE	ofPAGES ASE PRINT OR TYPE	FOR LABORATOR	RY USE ONLY
COMPANY NAME: Koppers REPORT ATTENTION: John C SAMPLES COLLECTED BY:	INd.		<b>.</b>			JOB#: A91023	₹2 - A0 2
SAMPLES COLLECTED BY:  George Hoff.  FIELD IDENTIFICATION:				_		CUSTABBR:	
FIELD IDENTIFICATION:  ONE LINE PER SAMPLE CONTAINER	LAB LOC ID	COLLEC DATE	TION TIME	MEDIA	ANALYS	IS REQUESTED	ANALYSIS REMARKS
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SAMPLE REMARKS:			LE	VEL 1	2:	EXPRESS UPS MAIL CXX	GREY TAXI LAB
WHITE COPY - COFFEY LABORATORIES	/					PINK	COPY - CLIENTS COPY

### COFFEY LABORATORIES, INC.



#### CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

**PROJECT NUMBER** — Applies only to samples submitted by the company. This data is provided at the companies discretion.

**PROJECT NAME** — Your company's project name. This data is provided at the companies discretion.

**COMPANY NAME** — Name of the Company or individual requesting the analysis from Coffey Laboratories, Inc.

**REPORT ATTENTION** — Name of the person who receives the laboratory report.

**SAMPLE COLLECTED BY** — The person who took the sample signs this box and gives his/her title.

**FIELD ID** — A short description of the sample point (For example: "Effluent from sand filter"). This description will appear on the report. Use one line per sample bottle.

**COLLECTION DATE** — The date on which the sample(s) was/were collected.

**COLLECTION TIME** — The time at which the sample(s) was/were collected.

**MEDIA** — This is a description of the sample matrix.

**ANALYSIS REQUESTED** — Make one column for each parameter or group of parameters associated to a bottle.

**FOR LAB USE ONLY** — Do not mark in this area (Laboratory location & ID). All shaded areas are for laboratory use only. Please do not write in these areas.

**REMARKS** — Record any comments about each sample on the same line as the sample description, e.g., "Wastewater contains VOCs".

**RELINQUISHED BY** — The sampler signs this box when he/she gives the sample to someone else, and then fills in the date and time they left his possession.

**RECEIVED BY** — The person who receives the samples signs here and fills in the date and time received. The date and time should be the same as the last one unless the samples were shipped.

**SAMPLE REMARKS** — Record any comments regarding the sample(s) as a whole or information pertinent to the sample.

**SAMPLES SHIPPED VIA** — How the samples are being shipped to the laboratory, e.g., "UPS".

Facility Name/Location is different)  NAME ADDRESS PAULON ADDRESS PULLONE	nclude Jases J.	Tel 721	of Rock	DISCH	ARGE MC (2.16) OBJ 7	ONITORI	ING REPO	N SYSTEM (NPDE. DRT (DMR) (17-19) HARGE NUMBER		- A		Form A OMB N Expires	o. 204	0-0004
LOCATION Multurnah excety			retz	FROM YEAR (20-21)	<del></del>	ТО	91	MO DAY  3 / 28:29) (30:31)	30 77 4743 NOTE: Read	•	efore co	mpleting	this f	form.
PARAMETER		$\overline{}$	(3 Card Only) QL (46-53)	JANTITY OR LOADIN		(4 Card	Only) 8-45)	QUALITY OR C (46-53)	ONCENTRATION (54-61)		ио			SAMPLE TYPE
(32-37)			AVERAGE	MAXIMUM	UNITS	MIN	MUMIN	AVERAGE	MAXIMU	M UNIT	EX (62-6:	ANALY	SIS	(69-70)
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)  NAME Koppers Inuds  ADDRESS 7540 NW ST	<u>tries Inc.</u>	- <del> </del>	DISCH	101 ARGE MOI 12-18) 100	HARGE ELIMINATION IN TORING REP	ON SYSTEM (NPDES ORT (DMR) (17-19)				Form Appr OMB No. 2 Expires 3-3	2040-0004
PORTLAND_OR_	<u>97210</u>	_ <del></del>	PERM	TNUMBER	DISC	HARGE NUMBER	2077 т				
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		<del></del>	FROM 91	MO D/	TO 91	MO DAY	47450	i			
-MULTNOMAH-	COONT X	· · · · · · · · · · · · · · · · · · ·		(22-23) (24-		2 <u>1</u> (28-29) (30-31)	NOTE: Read ins	tructions befo	re com	pleting th	is form.
(3 Card Only) PARAMETER (46-53)			ANTITY OR LOADIN (54-61)				ONCENTRATION (54-61)	1 E	NO.	FREQUENC OF ANALYSIS	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
FLOW	SAMPLE MEASUREMENT	NO FLOW		•							
	PERMIT REQUIREMENT			-							
TEMP	SAMPLE MEASUREMENT			* 1							1
,	PERMIT REQUIREMENT				NO FLOW						
PH	SAMPLE MEASUREMENT				·						
	PERMIT REQUIREMENT				NO FLOW						
OIL & GREASE	SAMPLE MEASUREMENT					- ,					
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NAME/TITLE PRINCIPAL EXECUTIVE			OF LAW THAT I HAVE F					TELEPHON	<b>E</b>	D A	\ T E
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TYPED OR PRINTED	and or	C 3 1319. (Penalties un maximum imprisonment o	der these statutes may in of between 6 months and 5 y	ctude fines úp ears.)		ICER OR AUTHO	DIZED AGENT A	REA NUME			MO DAY
COMMENT AND EXPLANATION OF A	NY VIOLATIONS (R	eference all attachmen	is here)							42	,

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

Koppers002330

EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED UNTIL SUPPLY IS EXHAUSTED.

### **GENERAL INSTRUCTIONS**

- 1. If form has been partially completed by preprinting, disregard instructions directed at entry of that information already preprinted.
- 2. Enter "PERMITTEE NAME/MAILING ADDRESS (and facility name/location, if different)," "PERMIT NUMBER," and "DISCHARGE NUMBER" where indicated. (A separate form is required for each discharge.)
- 3. Enter dates beginning and ending "MONITORING PERIOD" covered by form where indicated.
- 4. Enter each "PARAMETER" as specified in monitoring requirements of permit.
- 5. Enter "SAMPLE MEASUREMENT" data for each parameter under "QUANTITY" and "QUALITY" in units specified in permit.
  "AVERAGE" is normally arithmetic average (geometric average for bacterial parameters) of all sample measurements for each parameter obtained during "MONITORING PERIOD." "MAXIMUM" and "MINIMUM" are normally extreme high and low measurements; obtained during "MONITORING PERIOD." (NOTE: to municipals with secondary treatment requirement, enter 30 day average of sample measurements under "AVERAGE" and enter maximum 7-day average of sample measurements obtained during monitoring period under "MAXIMIM"
- 6. Enter PREMIT REQUIREMENT" for each parameter under "QUANTITY" and "QUALITY" as specified in permit.
- 7. Under "NO. EX" enter number of sample measurements during monitoring period that exceed maximum (and/or minimum or 7-day average as appropriate) permit requirement for each parameter! If none, enter "0".
- 8. Enter FREQUENCY OF ANALYSIS" both as 'SAMPLE MEASUREMENT" (actual frequency of sampling and analysis used during monitoring period) and as 'PERMIT REQUIREMENT" specified in permit. (e.g., Enter "CONT." for continuous monitoring.

  "1/7" for one day per week. "1/30" for one day per month. "1/90" for one day per quarter, etc.)
- 9. Enter SAMPLE TYPE" both as "SAMPLE MEASUREMENT" (actual sample type used during monitoring period) and as "PERMIT REQUIREMENT," (e.g., Enter "GRAB" for individual sample. "24HC" for 24 hour composite. "N/A" for continuous monitoring, etc.)

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- 10. WHERE YIOLATIONS OF PERMIT REQUIREMENTS ARE REPORTED, ATTACH A BRIEF EXPLANATION TO DESCRIBE CAUSE AND CORRECTIVE ACTIONS TAKEN REFERENCE EACH VIOLATION BY DATE.
- 11. If 'no discharge" occurs during monitoring period, enter "NO DISCHARGE" across formlin place of data entry.
- 12. Enter ANAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER" with "SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR-AUTHORIZED AGENT," "TELEPHONE NUMBER" and "DATE" at bottom of form.
- 13. Mail signed Report to Office(s) by date(s) specified in permit. Retain copy for your records.
- 14. More detailed instructions for use of this DISCHARGE MONITORING REPORT (DMR) form may be obtained from Office(s) specified in permit.

LEGAL NOTICE

This report is required by law (33 U.S.C. 1318: 40 C.F.R. 125.27). Failure to report or failure to report truthfully can result in vivil penalties not to exceed \$10,000 per day of violation; or in criminal penalties not to exceed \$25,000 per day of violation, or by imprisonment for not more than one year, or by both 2008.

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arah sukata

PE MIT EE NAME/ADDRESS (Include Fit. 'y Name/Location if different) NAME KO	ppers Ind.	Inc		(2-16)	IARGE ELIMINATION S	YSTEM (NPDES T (DMR) (17-19)	)				
ADDRESS 7540 NW St. Helens Rd. Portland, OR 97210			_ 101003	IT NUMBER	Disch	OO1	3077 <b>-</b> J	Form Approv		04	
								Approval exp			
FACILITY NW Plant			YEAR	MONIT	ORING PERIOL	MO DAY	47430				
LOCATION Multnomah Co.		·	- FROM 96	12 01	TO 96 ]	12 31	NOTE: Read inst	uations bofor	0 00m	nlatina thic	form
		(3 Card Only) QU	(20-21) ANTITY OR LOADIN	(22-23) (24-2 IG		8-29) (30-31) QUALITY OR C	CONCENTRATION	actions peroi	T		I
(32-37)		(46-53)	(54-61)		(38-45)	(46-53)	- (54-61)		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(0.50)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
FLOW	SAMPLE MEASUREMENT	44,516		GPD					N/A	18/31	EST.
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R.D. COLLINS, VP	SIGNIFIC THE PO 33 U.S	CANT PENALTIES FOR OSSIBILITY OF FINE AN B.C. § 1319. (Penalties	SUBMITTING FALSE INI ID IMPRISONMENT, SEE under these statutes ma	FORMATION, INC 18 U.S.C. \$ 10 By include fine	CLUDING CLUDING	<del></del>	AL EXECUTIVE	503 286-	3681	97 01	L 02
TYPED OR PRINTED  COMMENT AND EXPLANATION OF AN	\$10,000	and or maximum imprisor	nment of between 6 months	and 5 years.)	OFFICE	ER OR AUTHOR	RIZED AGENT C	REA NUME	ER	YEAR M	DAY

FOURTH QUARTER PAH RESULTS ARE ATTACHED

OF



Koppers Industry

Job Number: 961203V

Page Number: 3 of 4

Lab Sample ID: 961203V-1

Field ID: Wastewater Tanks 1,3 & 5

Date/Time: 12/03/96 0800 Matrix: Waste Water

EPA Category: Extractable Organics

Analysis Performed: EPA 8310; Polynuclear Aromatic Hydrocarbons by HPLC.

Analysis Date: 12/23/96

Analyst: VB

	Detection	Laboratory	Analytical
Parameter	Limit	Blank	Result
Acenaphthene	10.	ND	ND
Acenaphthylene	10.	ND	ND
Anthracene	1.	ND	ND
Benzo(a)anthracene	0.1	ND	4.0
Benzo(a)pyrene	0.4	ND	11.
Benzo(b)fluoranthene	0.1	ND	19.
Benzo(g,h,i)perylene	0.4	ND	6.4
Benzo(k)fluoranthene	0.1	ND	15.
Chrysene	1.	ND	7.
Dibenzo(a,h)anthracene	0.4	ND	1.7
Fluoranthene	1.	ND	15.
Fluorene	5.	ND	ND
Indeno(1,2,3-cd)pyrene	0.5	ND	7.3
Naphthalene	5.	ND	ND
Phenanthrene	1.	ND	ND
Pyrene	1.	ND	15

Results expressed as mg/l unless otherwise noted.

ND means none detected at or above the detection limit listed.

101.4

## RECEIVED

JAN - 2 1997

KOPPERS INDS., INC. PORTLAND. OR

Coffey Laboratories, Inc.

<del></del>								
(IMPORTAN	IMPORTANT MESSAGE							
FOR Umos								
DATE 12/18/96	A.M. TIMEP.M.							
M & Mit Z	as)							
OF DEQ m	onthly							
PHONE 229-3	······································							
D FAX	NUMBER EXTENSION							
O MOBILE AREA CODE NUMBER TIME TO CALL								
TELEPHONED	PLEASE CALL							
CAME TO SEE YOU	WILL CALL AGAIN							
WANTS TO SEE YOU	RUSH							
- RETURNED YOUR CALL	SPECIAL ATTENTION							
MESSAGE Ne say	there's an							
excessive in	the phenols +							
Wondering why	CALKY 12/23/96-LVMM							
- WAS AN ANOMALY	WAS AN ANOMALY, CALLED CORPOR -NO							
Revisor for it.								
SIGNED								

12/3/96 WWTKS 1,35 48°F 7.1 Ph WW TKS 2,4,6 49°F

# Koppers002336

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CENTRAL OREGON BRANCH 827 SW 7th Redmond, OR 97756 PHONE/FAX (541) 548-0972	CORPORATE HEADQUARTERS  12423 NE Whitaker Way Portland, OR 97230 (503) 254-1794 FAX: (503) 254-1452						EASTERN OREGON BRANCH 419 SW 5th Pendleton, OR 97801 PHONE/FAX (541) 276-0385			
Report Attention:  Amos Kamerer  Company Name:  Koppen S Ind Ine  Mailing Address:  Ind On 97210  Phone:  Phone:  Report Instructions (Special - Additional- Job Specific):	Project Project Project St	Name:	ntainers: Tharound itonal Fee	Y/N Other:		FOR LABORATORY USE ONLY				
Sample ID	Loc.	ID	#	Collection Date / Time	Media		Analysis Requested		Test/ Profile	
WWTKS 1,3,5			12/	3/90 840		4	211/Grease			
W.W. TKS 13,5			/2/	Jr. 8000		1	Levols			
WW TKS 2,4,6			12/	M Sac		0,	11. Chense			
WW TKS 246			7/	1/9/8/00		Ph	lenol5			
Sampled By: T.J. Turner			AUT	HORIZED CUSTOME	R SIGNATURE		DATE:			
Sample Comments	Relingula	hed by: (Pleas	ee Sign)	Date 12/3/	96 8:43	Th	Received by: (Sign)	Date 12/3/96	Time 8.45	

White Copy-Laboratory Yellow Copy - Customer

COMPLETE THIS FORM PER INSTRUCTIONS ON REVERSE SIDE

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET.

### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION - Name of the person who receives the laboratory report.

CUSTOMER NAME - Name of the company or individual requesting the analysis.

MAILING ADDRESS - Address of the customer to which the laboratory report and billings should be sent.

REPORT INSTRUCTIONS - A brief description of any special mail or transmittal instruction or address information pertaining to extra report

copies

PROJECT NAME - Applies to customer project name.

PROJECT NUMBER - Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST

STATE COMPLIANCE - Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED

SAMPLE ID - A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter"). This

description will appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME = The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle or container...

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - ... The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the

sample left his/her possession, etc.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be

same as "Relinquished by" unless the sample(s) was shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

AUTHORIZED CUSTOMER,

SIGNATURE - Form must be signed by authorized representative of customer.

### TERMS AND CONDITIONS

### PRICING AND CHARGES

Prices to be charged for work performed for CUSTOMER are those currently published in the COFFEY Laboratories, Inc. (CLI) standard pricebook unless otherwise agreed in writing by the CUSTOMER and CLI. CUSTOMER must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

### DELIVERY AND LIABILITY LIMITATIONS

The specific format of the goods will be defined by CUSTOMER to CLI upon delivery of the sample(s) to CLI. CLI will analyze samples provided by CUSTOMER as requested by CUSTOMER in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP).

### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CUSTOMER as proprietary and confidential. No CUSTOMER information will be released to third persons without the written request of the CUSTOMER.

### LIMITATION OF LIABILITY AND WARRANTY

CLI gives no warranty, express or implied, or of fitness for a particular purpose, in connection with its analytical testing or reporting. Any liability of CLI to CUSTOMER or any third party shall be limited to the cost of analysis charged to CUSTOMER.

### PAST DUE ACCOUNTS

CUSTOMER agrees to pay 11/2 % per month on all sums past due until paid in full as a service charge and all of CLI's collection costs, including reasonable attorney fees.

### EXPERT TESTIMONY AND COURT APPEARANCES

In the event CUSTOMER requires the further written opinion or testimony of any employee of CLI, including response to a subpoena issued by CUSTOMER or any third person. CUSTOMER agrees to pay such additional fees and expenses as may be reasonably assessed by CLI.

### ALTERNATIVE DISPUTE RESOLUTION (ADR)

Any disputes arising out of this Agreement or the analytical testing of reporting of CLI shall be settled through mediation and/or arbitration rather than litigation, and the cost of the ADR shall be borne equally by both parties.

### APPLICABLE LAW

Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.

# Koppers002338

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CENTRAL OREGON BRANCH 827 SW 7th Redmond, OR 97756 PHONE/FAX (541) 548-0972  Report Attention: Company Name: Mailing Address: Hall May ST Helens Phone: 603 281 3181  Report Instructions (Special - Additional- Job Specific):	R. ( )	CORPORATE HEADQUARTERS 12423 NEi Whitaker Way Portland, OR 97230 (503) 254-1794 FAX: (503) 254-1452  PO Number: Project Number: Project Name: EPA Protocol Containers: Y/N Other:  Sample Turnaround Reporting Request Standard State Compliance Format FAX Results - Preliminary  Priority (Additional Fee) FAX Results - Preliminary  Rush (Additional Fee) FAX Results - Fax Results Emergency (Additional Fee) Extra Report Copy Initials:  (Fees Associated)					corting Requirements of the compliance Results - Pre	Format liminary	EASTERN OREGON BRANCH 419 SW 5th Pendleton, OR 97801 PHONE/FAX (541) 276-0385  FOR LABORATORY USB ONLY Job Number:  Custabbr:  Custabbr:  Custabbr:  Card #:  Cash / Check / CC:\$  Billing Code: 1 2 3 4  QC LEVEL: 1 2 3 4  FEDX BUS COURIERS UPS LAB CLIENT MAIL AIR		
Sample ID		Loc.	ID	#	Colle Date	ection / Time	Media		Analysis Requested		Test/ Profile
WW TKS 1,3,5					14/7/12	gad.			PAH		-
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	, a					- /					
Antonio de la companio del la companio del la companio de la compa											
Sampled By: // /////					AUTHORIZE	D CUSTOMER	SIGNATURE		DATE:		
Sample Comments	270	Relinquis	hed by: (Ple	sse-Sig	n)	Date 12/3/	<u> </u>		Received by: (Sign)	Date	71me 3:45
	Fli	O.	Zna		•	12/3/4		- 1 ·	ina 1 1 1	12/3/96	1225

White Copy-Laboratory Yellow Copy - Customer

COMPLETE THIS FORM PER INSTRUCTIONS ON REVERSE SIDE

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### INSTRUCTIONS

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MAILING ADDRESS -Address of the customer to which the laboratory report and billings should be sent.

A brief description of any special mail or transmittal instruction or address information pertaining to extra REPORT INSTRUCTIONS report

copies. PROJECT NAME -

Applies to customer project name.

PROJECT NUMBER -Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST

STATE COMPLIANCE -Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED

A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter") SAMPLE ID -

description will appear on the report.

The date on which the sample(s) was/were collected. COLLECTION DATE COLLECTION TIME -The time at which the sample(s) was/were collected.

MEDIA -This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED Use one line for each analysis or group of analyses associated to a specific bottle or container...

SAMPLE COLLECTED BY -The person who collected the sample(s) signs here.

RELINQUISHED BY -The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the sample left his/her possession, etc.

RECEIVED BY -

The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be same as "Relinquished by" unless the sample(s) was shipped.

IOB OR SAMPLE REMARKS -General sample or job remarks.

**AUTHORIZED CUSTOMER** 

SIGNATURE -Form must be signed by authorized representative of customer

### TERMS AND CONDITIONS.

### PRICING AND CHARGES

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### PAST DUE ACCOUNTS

CUSTOMER agrees to pay 11/2 % per month on all sums past due until paid in full as a service charge and all of CLI's collection costs, including reasonable attorney fees.

### **EXPERT TESTIMONY AND COURT APPEARANCES**

In the event CUSTOMER requires the further written opinion or testimony of any employee of CLI, including response to a subpoena issued by CUSTOMER or any third person. CUSTOMER agrees to pay such additional fees and expenses as may be reasonably assessed by CLI.

### ALTERNATIVE DISPUTE RESOLUTION (ADR)

Any disputes arising out of this Agreement or the analytical testing of reporting of CLI shall be settled through mediation and/or arbitration rather than litigation. and the cost of the ADR shall be borne equally by both parties.

Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: December 27, 1996

Job Number: 961203V

PO Number: Amos Kamerer Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

### **Analytical Narrative**

The samples were received on 12/03/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
961203V-1	Wastewater Tanks 1,3 & 5	Waste Water	12/03/96	0800
961203V-2	Wastewater Tanks 2,4 & 6	Waste Water	12/03/96	0800

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

RECEIVED

RAK/atc

JAN - 2 1997

KOPPERS INDS., INC. PORTLAND.OR

Sincerely,

Rona A. Klueh Technical Director

Coffey Laboratories, Inc.



Koppers Industry

Job Number: 961203V

Page Number: 3 of 4

Lab Sample ID: 961203V-1

Field ID: Wastewater Tanks 1,3 & 5

Date/Time: 12/03/96 0800 Matrix: Waste Water

EPA Category: Extractable Organics

Analysis Performed: EPA 8310; Polynuclear Aromatic Hydrocarbons by HPLC.

Analysis Date: 12/23/96

Analyst: VB

	Detection	Laboratory	Analytical
Parameter	Limit	Blank	Result
Acenaphthene	10.	ND	ND
Acenaphthylene	10.	ND	ND
Anthracene	1.	ND	ND
Benzo(a)anthracene	0.1	ND	4.0
Benzo(a)pyrene	0.4	ND	11.
Benzo(b)fluoranthene	0.1	ND	19.
Benzo(g,h,i)perylene	0.4	ND	6.4
Benzo(k)fluoranthene	0.1	ND	15.
Chrysene	1.	ND	7.
Dibenzo(a,h)anthracene	0.4	ND	1.7
Fluoranthene	1.	ND	15.
Fluorene	5.	ND	ND
Indeno(1,2,3-cd)pyrene	0.5	ND	7.3
Naphthalene	5.	ND	ND
Phenanthrene	1.	ND	ND
Pyrene	1.	ND	15.
			984

Results expressed as mg/l unless otherwise noted.

ND means none detected at or above the detection limit listed.

## RECEIVED

JAN - 2 1997

KOPPERS INDS., INC. PORTLAND, OR



Koppers Industry

Job Number: 961203V Page Number: 2 of 4

Lab Sample ID: 961203V-1

Field ID: Wastewater Tanks 1,3 & 5

Date/Time: 12/03/96 0800 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	12/04/96	MJP
Total Phenols	EPA 420.1	0.05	0.08	mg/L	12/04/96	RAP

ND means none detected at or above the detection limit listed.

## RECEIVED

JAN - 2 1997

KOPPERSINUS, INC. PORTLAND, OR



Koppers Industry

Job Number: 961203V

Page Number: 4 of 4

Lab Sample ID: 961203V-2

Field ID: Wastewater Tanks 2,4 & 6

Date/Time: 12/03/96 0800 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	12/04/96	MJP
Total Phenols	EPA 420.1	0.05	ND	mg/L	12/04/96	RAP

ND means none detected at or above the detection limit listed.

## RECEIVED

JAN - 2 1997

KOPPERSINUS, INC. PORTLAND. OR

### INTEROFFICE MEMO

To: Amos Kamerer

From:

T.J. Turner

Location: Portland, Or.

Location: Portland, Or.

Subject:

Tank Farm

Date:

Dec. 4, 1996

2:00 pm

Due to lower tank farm flooding, we are pumping directly to the river and outfall. We have fully inspected the lower tank farm and related areas for possible contamination and tank displacement. William Henle has been monitoring the situation. We will continue pumping till we are out of danger.

T. J. Turner

General Foreman

12/11/96 WW The 24/6 49° F 7.0 PH WWTKS 183,5 50° F 7.0 PH

CHAIN OF CUS	TODY RECORD	Portland Offic	e
		7133 North Lombard	d Street, Portland, OR 97203
Date	Page of	Phone: (503) 286-94	164 FAX: (503) 285-7831
Project Name: Project Number:  Testing Priority Notification Me  Normal	thod(s) elephone	Analyses To Be Pe	
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12/11 13	330 ON/ BR	ease	
1.		+	
711	370/hen	0/5	
12/11	33001/6	eease	
12/4 13	330		
2/1			•
Date/Tim	Inspection Samp Laboratory Projection  Due Date:	ple Number:ect Number:	Method of payment  PO # Credit Cash/Check #  Amount Paid: \$
	Project Name: Project Number:  Testing Priority Notification Me  Normal To Rush	Project Name:	Date Page of Phone: (503) 286-94  Project Name:

White Copy - Laboratory Yellow Copy - Client Copy

Koppers002346

CI Form 100 (COC) Rev A



# CERTIFICATE OF ANALYSIS

CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 12/11/96

PO#:

PROJECT NAME:

CI SAMPLE#	CLIENTS ID#	DATE	TIME	DESCRIPTION
961410-001-01	WW 1,3,5	12/11/96	1330	Wastewater Grab
961410-001-02	Ww 1.3.5	12/11/96	1330	Wastewater Grab
961410-002-01	WW 2.4.6	12/11/96	1330	Wastewater Grab
961410-002-02	WW 2,4.6	12/11/96	1,330	Wastewater Grab

REPORT DAT	TE: 12/12/96	REPORT NUM	PAGE: 1 OF 1			
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANAY YST
WW 1 3.5 961410-001 01	O&G. TOTAL. GPAV EPA 413.1/9070	TOTAL DIL & GREASE	Ē,	ррм	2	laura H.
961410-901-02	PHENOLS, TOTAL EPA 420 !	TOTAL RECOVERABLE PHENOLICS	0 08	PPM	0.05	Dick R
WW 2.4.6 961410-002-01	08G, TOTAL, GRAV EFA 413.1/9070	TOTAL OIL & GREASE	6	M99	2	taura N
<b>961</b> 416-002-02	PHENOLS, TOTAL	TOTAL RECOVERABLE PHENOLICS	80.0	PPM	0.05	Dick R.

REVIEWED BY: <

Richard D. Reid - Laboratory Director

12/23/96 WW 12,3 450 F 6,9 Ph WW 2,4,6 470 F 7.0 Ph

### Columbia Inspection, Inc.

### **CHAIN OF CUSTODY RECORD**

### **Portland Office**

Laboratory • Inspection • Tank Calibration

7133 North Lombard Street, Portland, OR 97203

Environmental • Petroleum • OR Certified Water Testing	Date	Pa	ge of	Phone: (503	) 286-9464 FAX: (5	503) 285-7831	
14 T 0-				Analyses T	o Be Performed		
Company Name: Koppens Ind INC	Project Name:						ļ
Attention: Amos Kamenen	Project Number:						
Address: 7540 Nw 57 Helens N	41						
PORTLAND ONC	Testing Priority Notificat	tion Method(s)					
<b>1</b> 1	Normal	☐ Telephone					
Phone: (503) 2863681	Rush	n					
FAX: (503) 285 2831	Rush	□ FAX					
Sampler: Trunca Submitted	Due Date	☐ Mail					
	Sample Sample	1 - 1					
Sample id # Sample Description	Matrix Date	Time					
WW135 Phenols	12/2	3 1300					
WW - D'1/C	20/	1300					$\dashv \dashv$
www. Dil/Garase	+ + + + + 2 3	,,,,,,,,	<del></del>				
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Relinquished By: Date/Time Received By		Date/Time	FOR 1	ABORATORY USE	ONLY M	ethod of payment	
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1 the same			mspection 58m	ple Number:	PO □ Cre		
Relinquished By: Date/Time Received By		Date/Time	Laboratory Proj	ect Number:		sh/Check#	
	1/1/2/	12/23	Due Date:		Amount	David: @	
Columb	hia Inspection, Inc.	11/05		.   Normai   Special	AMAUN	1 alti, 0	

Koppers002349



# CERTIFICATE OF ANALYSIS

CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 12/23/96

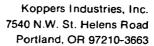
PO#:

PROJECT NAME

CI SAMPLE #	CLEENTS ILH	DATE	TEME	DESCRIPTION
961484-901-01	Ww 1 3,5	12/73/95	1300	Wastewater Grab
561461-071-07	WW I.J 5	12/23/95	1300	Wastewater Grab
96144 303-01	₩₩ 2.4.¢	12/23/96	1 300	Wastewater Grab
961461-002-02	WW 2,4.6	12/23/96	1396	Hastewaren Grab

REPORT DAT	TE: 12/24/96	REPORT NUM	PAGE: 1 OF 1			
SAMPLE ILST		PARAMETLÍX	ANALYST			
W 1.3.5						
961464-001-01	PHENOLS, TOTAL EPA 420 I	TOTAL RECOVERABLE PHEROLICS	0, <b>1</b> ₹	PPM	0.05	Vick P
951464-001-02	08G TOTAL, GEAV EPA 413 1/9070	IGTAL OIL & GREASE	?	F2H	2	taura H.
WW 2 4.6						
961454-(02-0)	PHENOLS: TOTAL EPA 420:1	TOTAL RECOVERABLE PHENDLICS	ИĎ	PP#	0 05	Dick R
9613-7 09	-64, FOTAL, GRAV 19A 413.1/9070	TOTAL OIL & GREASE	5	PPH	?	laura H.

REVIEWED BY.





Telephone: 503-286-3681 Fax: 503-285-2831

December 23, 1996

Amos S. Kamerer, Plant Manager Koppers Industries, Inc. 7540 NW St. Helens Rd. Portland, Or. 97210

Dear Sir:

On December 23 1996 I did a full walk through inspection of plant operations. Due to record rainfall the past week I found the lower tank farm flooding, all waste water tanks overflowing, and rain still falling.

If this situation continues, we will sustain further damage than we have already to pumps and other equipment. Due to this situation, I started pumping the overflow of rainwater directly to the plant outfall. We will continue this until we are out of danger. At this time, we also sampled waster water tanks 1, 3 and 5 also tanks 2, 4 and 6 and requested rush analysis.

Sincerely,

T. J. Turner General Foreman

Koppers002351

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

	1	Ţ·					J		Ţ		[ · · · · · · ]		Γ	T
					MONTH	December	YEAR/ <u>/</u> 2	26						
					FLOW			DAYS OF Engagemy						
	WWT-1	WWT-2	WWT-3	WWT-4	WWT-5	WWT-6	TOTAL	Ameira	#DAYS IN	TOTAL	G.P.D.		<del> </del>	
GLS, PER TANK	45,000	45,000	45,000	45,000	20,000	20,000	OF TANKS	80,000/000	MONTH	AIL	DISCHARG	<b>E</b>		
# OF PUMPINGS	177	117	177	11/	-///		18	9					·	
GALS.PUMPED	135,000	135,000	135,000	135,000		60,000		720,000	3/	1,380,000	44,516			1
					SAMPLE C	ONCENTRA	TION LEVE	LS						
						<del></del>					MW.	AVG.	MAX.	UNIT
TEMPERATURES PH	48 49	47 50	6.9 7.0								45	<u>48</u>	1 50	9 F SU
OIL & GREASES	7.1 7.0 NO NO	5,0 6.0	7.0 6.0						]		6.9 N.O.	7,0	7,0	MG/L
PHENOLS	10B NO	108 103	13 NO								N.O.	,06	1/3	MG/L
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### INTEROFFICE MEMO

To:

Amos Kamerer

From:

T.J. Turner

Location: Portland, Or.

Location:

Portland, Or.

Subject:

Tank Farm

Date:

Dec. 29, 1996

2:00 pm

Due to lower tank farm flooding, we are pumping directly to the river, via the borrowed fire hose and through our normal outfall. We have fully inspected the lower tank farm and related areas for possible product contamination and tank displacement, nothing was found. William Henle, Hazard Material Coordinator, Portland Fire Bureau, has been monitoring the situation. We will continue pumping till we are out of danger.

T. J. Turner

General Foreman

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DDRESS	KOPPERS INDUST 7540 NW ST. HE PORTLAND, OR S	LENS RD.	101C	(2-16) 003 MIT NUMBER		(17-19) 001 HARGE NUMBER	3077-J	Form Approved. OMB No. 2040-0004 Approval expires 10-31-94				
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OCATION MULTNOMAH CO.		. — —	— FROM 96	11 0	L <sup>™</sup> 96 ]	11 30 28-29) (30-31)	NOTE: Read instr	uctions befor	re com	pleting tl	nis form.	
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### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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### INTEROFFICE MEMO

To: Amos Kamerer

From:

T.J. Turner

Location: Portland, OR

Location:

Portland, Or

Subject:

Tank Farm

Date:

Nov. 19, 1996

6:00am

Due to lower tank farm flooding, we are pumping directly to the river and outfall. We have fully inspected the lower tank farm and related areas for possible contamination and tank displacement. We have contacted the fire department, Mr. Pat Davies and Lt. Bill Morse for assistance. William Henle has been coordinating help and monitoring the situation. We will continue pumping till we are out of danger.

Turner General Foreman

John Holteop, City Ptd., Environmenton services, Also stopped by and is Aware of our pumping direct. 11/18/96 7.1 50°F TX 2,46

# Koppers002358

PORTLAND BRANCH

12423 NE Whitaker Way Portland, OR 97230

(503) 254-1794 FAX: (503) 254-1452

Sampled by: (Please Print)

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Date

Time

Report Attention: Anos hanerer Company Name: Koppers Ind Inc. Address: 7540 Nw 5THelens nd for thank Ore e.	Project Name: Project Number: PO Number: Sample Turn	around	]	Reporting R	FOR LABORATORY USE ONLY Page  Job Number:  Custabbr:  VISA M/C Expires:	af	
Phone: (503, 2863CS/FAX: (503, 285283/ Report Instructions:	Priopity (1.5x Std. Fee)					Card #:Cash / Check: \$	#2
·	Rush (2x Std. Fe			es Associated		Billing Code: 1 2 3 4  QC LEVEL: 1 2 3 4  FEDX BUS COURIER UPS LAB CI	IENT MAIL
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8.30. White Copy - Laboratory Copy Yellow Copy - Client Copy 3/00 SHADED AREAS FOR LABORATORY USE ONLY 1300 11.1696

Date

Time

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

Relinquished by: (Please Sign)

Received by: (Sign)

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

**REPORT ATTENTION** - Name of the person who receives the laboratory report.

**COMPANY NAME** - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

**PROJECT NUMBER** - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

### CONDITIONS

### PRICING AND CHARGES

Prices to be charged for work performed for CLIENT are those currently published in the Coffey Laboratories, Inc. (CLI) standard pricebook. CLIENT must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. All submissions of samples with testing requirements to CLI will be understood to be an agreement for services. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

### DELIVERY AND LIABILITY LIMITATIONS

CLI will analyze samples provided by CLIENT as requested by CLIENT in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP). The maximum total liability assumed by CLI for work performed for CLIENT will in all cases be limited to the cost of the analysis. The specific format of the deliverable goods will be defined by CLIENT to CLI upon transfer of the samples to CLI. This warranty supersedes all other warranties.

### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: November 21, 1996

Job Number: 961118AC
PO Number: Amos Kamerer
Project No: None Provided
Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

### **Analytical Narrative**

The sample was received on 11/18/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
961118AC-1	STM W TKS 2,4,6	Storm Water	11/18/96	0800

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh
Technical Director

RAK/atc

MOA 32 1

KOPPERSINDE INC.



Koppers Industry

Job Number: 961118AC

Page Number: 2 of 2

Lab Sample ID: 961118AC-1

Field ID: STM W TKS 2,4,6 Date/Time: 11/18/96 0800 Matrix: Storm Water

EPA Category: Conventional Parameters

		Detection	Analytical	
Parameter	Method	Limit	Result	Units
Oil & Grease	EPA 413.1	3.	4.	mg/L
Total Phenols	EPA 420.1	0.05	0.17	mg/L



MOV 2 8 1996

KOPPERS INDS. INC. PORTLAND OR

7.2 PH 10/31 53°

SWT 1,3,5

# Koppers002363

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CENTRAL OREGON BRANCH 827 SW 7th Redmond, OR 97756 PHONE/FAX (541) 548-0972  Report Attention: Company Name: Mailing Address: Mailing Address: Delta Colored Phone: 286-386 FAX: Report Instructions (Special - Additional- Job Specific):	PO Nur Project Project EPA Pr St St Ru Ru	12423 N Portland (503) 25.  mber:	VE With A Control of the With A Control of t	pitaker Way 97230 4 FAX: (Sees: Y/N (cound) al Fee) Fee) tional Fee)	Dther:	2	A19 SW 5th				
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White Copy-Laboratory Yellow Copy - Customer

COMPLETE THIS FORM PER INSTRUCTIONS ON REVERSE SIDE

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

### CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION Name of the person who receives the laboratory report.

Name of the company or individual requesting the analysis.

MAILING ADDRESS - Address of the customer to which the laboratory report and billings should be sent.

REPORT INSTRUCTIONS - A brief description of any special mail or transmittal instruction or address information pertaining to extra report

copies.

PROJECT NAME - Applies to customer project name.

PROJECT NUMBER - Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST STATE COMPLIANCE -

Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED

SAMPLE ID - A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filler"). This

description will appear on the report

COLLECTION DATE - The date on which the sample(s) was/were collected.

The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle or container.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the

sample left his/her possession, etc.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be same as "Relinquished by" unless the sample(s) was shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

AUTHORIZED CUSTOMER

Form must be signed by authorized representative of customer

### TERMS AND CONDITIONS

### PRICING AND CHARGES

Prices to be charged for work performed for CUSTOMER are those currently published in the COFFEY Laboratories, Inc. (CLI) standard pricebook unless otherwise agreed in writing by the CUSTOMER and CLI. CUSTOMER must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

### DELIVERY AND LIABILITY LIMITATIONS

The specific format of the goods will be defined by CUSTOMER to CLI upon delivery of the sample(s) to CLI. CLI will analyze samples provided by CUSTOMER as requested by CUSTOMER in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP).

### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CUSTOMER as proprietary and confidential. No CUSTOMER information will be released to third persons without the written request of the CUSTOMER.

### <u>LIMITATION OF LIABILITY AND WARRANTY</u>

CLI gives no warranty, express or implied, or of fitness for a particular purpose, in connection with its analytical testing or reporting. Any liability of CLI to CUSTOMER or any third party shall be limited to the cost of analysis charged to CUSTOMER.

### PAST DUE ACCOUNTS

CUSTOMER agrees to pay 11/2 % per month on all sums past due until paid in full as a service charge and all of CLI's collection costs, including reasonable attorney fees.

### EXPERT TESTIMONY AND COURT APPEARANCES

In the event CUSTOMER requires the further written opinion or testimony of any employee of CLI, including response to a subpoena issued by CUSTOMER or any third person, CUSTOMER agrees to pay such additional fees and expenses as may be reasonably assessed by CLI.

### ALTERNATIVE DISPUTE RESOLUTION (ADR)

Any disputes arising out of this Agreement or the analytical testing of reporting of CLI shall be settled through mediation and/or arbitration rather than litigation, and the cost of the ADR shall be borne equally by both parties.

### APPLICABLE LAW

Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.

Rev. 11/9



Report Date: November 7, 1996

Job Number: 961031AC
PO Number: Amos Kamerer
Project No: None Provided
Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

### **Analytical Narrative**

The sample was received on 10/31/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
961031AC-1	WWT 1,3,5	Waste Water	10/31/96	1245

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,
Nonel Chul

Rona A. Klueh Technical Director

RAK/atc1

RECEIVED

NOV 13 1996

KOPPERS INDS., INC. PORTLAND. OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452



#### **Analytical Data**

Koppers Industry

Job Number: 961031AC Page Number: 2 of 2

Lab Sample ID: 961031AC-1

Field ID: WWT 1,3,5 Date/Time: 10/31/96 1245 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	<u>Limit</u>	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	11/01/96	MJP
Total Phenols	EPA 420.1	0.05	0.86	mg/L	11/05/96	RAP

ND means none detected at or above the detection limit listed.

## RECEIVED

MOV 13 1996

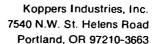
KOPPERS INDS., INC. PORTLAND, OR

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#### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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Telephone: 503-286-3681 Fax: 503-285-2831

October 18, 1996

Amos S. Kamerer Koppers Industries, Inc. 7540 NW St. Helens Rd. Portland, OR 97210

Dear Sir:

On this date I have done a full walk thought inspection of plant operations and I find the lower tank farm flooding, all waster water tanks overflowing, and rain still falling.

If this situation continues, we will sustain further damage than we already have to the pumps, motors and other equipment. Due to this situation, I started pumping the overflow of rainwater directly to the plant outfall. We will continue this until we are out of danger.

Sincerely,

T.J. Turner
General Foreman



Report Date: October 21, 1996

Job Number: 961011D

PO Number: Amos Kamerer Project No: None Provided

Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 10/11/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
961011D-1	WW, 2, 4, 6	Waste Water	10/11/96	0900

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh
Technical Director

RAK/atc

RECEIVED

OCT 24 1996

KOPPERS INDS., INC. PORTLAND. OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452



#### **Analytical Data**

Koppers Industry

Job Number: 961011D Page Number: 2 of 2

Lab Sample ID: 961011D-1

Field ID: WW, 2, 4, 6 Date/Time: 10/11/96 0900 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	10/11/96	MJP
Total Phenols	EPA 420.1	0.05	0.05	mg/L	10/11/96	RAP

ND means none detected at or above the detection limit listed.



OCT 24 1996

KOPPERS INDS.,INC. PORTLAND.OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452

5 Torm Water TK5 2,4,6 10/11/96 56° F 7.4 PH

# Koppers002373

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CORPORATE HEADQUARTERS
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452 CENTRAL OREGON BRANCH EASTERN OREGON BRANCH 827 SW 7th Redmond, OR 97756 PHONE/FAX (541) 548-0972 419 SW 5th Pendleton, OR 97801 PHONE/FAX (541) 276-0385 Report PO Number: ameren Attention: Project Number: Company Name: Project Name: **□NEW** Custabbr: EPA Protocol Containers: Y/N Other: □ VISA □ M/C Cardholder: Sample Turnaround Reporting Request Standard State Compliance Format FAX Results - Preliminary Priority (Additional Fee) Cash / Check / CC:\$ FAX Results-Final Report Instructions (Special - Additional- Job Specific): Rush (Additional Fee) Billing Code: 1 2 3 4 Verbals Results Emergency (Additional Fee). OC LEVEL: Extra Report Copy (Fees Associated) FEDX BUS MAIL · AIR Sample ID Collection
Date / Time **Analysis Requested** Media Test/ Profile GOOAN AUTHORIZED CUSTOMER SIGNATURE Sampled By: DATE: Relinquished by: (Please Sign) Sample Comments Received by: (Sign) Date T15 11

White Copy-Laboratory Yellow Copy - Customer

COMPLETE THIS FORM IER INSTRUCTIONS ON REVERSE SIDE

SUBMISSION OF SAMPLES WITH TESTING REQUIREMEN'S TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

#### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION -Name of the person who receives the laboratory report. CUSTOMER NAME -Name of the company or individual requesting the analysis.

Address of the customer to which the laboratory report and billings should be sent? MAILING ADDRESS -

A brief description of any special mail or transmittal instruction or address information pertaining to extra REPORT INSTRUCTIONS -

copies. PROJECT NAME -Applies to customer project name.

PROJECT NUMBER -Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST STATE COMPLIANCE -Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED

SAMPLE ID -A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter"). This

description will appear on the report.

COLLECTION DATE The date on which the sample(s) was/were collected.

COLLECTION TIME -The time at which the sample(s) was/were collected. This is a description of the sample media (e.g., drinking water, waste water, soil, etc.); MEDIA -

Use one line for each analysis or group of analyses associated to a specific bottle or container... ANALYSIS REQUESTED

SAMPLE COLLECTED BY The person who collected the sample(s) signs here.

**RELINQUISHED BY-**The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time sample left his/her possession, etc.

RECEIVED-BY -The person who receives the sample(s) signs here and fills in the date/time received. The date and time

same as "Relinquished by" unless the sample(s) was shipped. JOB OR SAMPLE REMARKS

General sample or job remarks.

**AUTHORIZED CUSTOMER** Form must be signed by authorized representative of customer. SIGNATURE -

#### TERMS AND CONDITIONS

#### PRICING AND CHARGES

Prices to be charged for work performed for CUSTOMER are those currently published in the COFFEY Laboratories, Inc. (CLI) standard pricebook unless otherwise agreed in writing by the CUSTOMER and CLI. CUSTOMER must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

#### DELIVERY AND LIABILITY LIMITATIONS

The specific format of the goods will be defined by CUSTOMER to CLI upon delivery of the sample(s) to CLI. CLI will analyze samples provided by CUSTOMER as requested by CUSTOMER in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP).

CLI will use its best efforts to treat all information regarding work performed for CUSTOMER as proprietary and confidential. No CUSTOMER information will be released to third persons without the written request of the CUSTOMER.

#### LIMITATION OF LIABILITY AND WARRANTY

CLI gives no warranty, express or implied, or of fitness for a particular purpose, in connection with its analytical testing or reporting. Any liability of CLI to CUSTOMER or any third party shall be limited to the cost of analysis charged to CUSTOMER.

#### PAST DUE ACCOUNTS

CUSTOMER agrees to pay 11/2 % per month on all sums past due until paid in full as a service charge and all of CLI's collection costs, including reasonable. attorney fees.

#### EXPERT TESTIMONY AND COURT APPEARANCES

In the event CUSTOMER requires the further written opinion or testimony of any employee of CLI, including response to a subpoena issued by CUSTOMER or any third person. CUSTOMER agrees to pay such additional fees and expenses as may be reasonably assessed by CLI.

#### ALTERNATIVE DISPUTE RESOLUTION (ADR)

Any disputes arising out of this Agreement or the analytical testing of reporting of CLI shall be settled through mediation and/or arbitration rather than litigation, and the cost of the ADR shall be borne equally by both parties.

Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.



RAK/atc

Report Date: October 18, 1996

Job Number: 961014AQ

PO Number: Verbal-Amos Kamerer

Project No: None Provided Project Name: Stormwater

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 10/14/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
961014AQ-1	STRMW TKS 1,3,5	Storm Water	10/14/96	1100

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

**--CEIVED** 

OCT 24 1996

KOPPERSINDS, INC. PORTLAND, OR

Sincerely,

Rona A. Klueh

Technical Director



#### **Analytical Data**

Koppers Industry

Job Number: 961014AQ Page Number: 2 of 2

Lab Sample ID: 961014AQ-1

Field ID: STRMW TKS 1,3,5 Date/Time: 10/14/96 1100

Matrix: Storm Water

EPA Category: Conventional Parameters

		Detection	Analytical	
Parameter	Method	Limit	Result	Units
Oil & Grease	EPA 413.1	3.	ND	mg/L
Total Phenols	EPA 420.1	0.05	ND	mg/L

ND means none detected at or above the detection limit listed.



OCT 24 1996

KOPPERS INDS., INC. PORTLAND, OR 10/14/96 5TM Water Ths 1,35 ph 6.5 Temp 60°F

## Koppers002378

PORTLAND BRANCH

12423 NE Whitaker Way

(503) 254-1794 FAX: (503) 254-1452

Portland, OR 97230

COFFEY LABORATORIES, INC.

CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Amos Manere Company Name: Koppers Ind Ind Address: 7540 Au STHele Portland, Ore 972  Phone: (503 256368/FAX:(503) 2852)  Report Instructions:	NS ROP PO	Standard							FOR LABORATORY USE ONLY Job Number:  Custabbr:  VISA M/C Expires:  Card #:  Cash / Check; \$  Billing Code: 1 2 3 4  QC LEVEL: 1 2 3 4  FEDX BUS COURIER UPS		#:					
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White Copy - Laboratory Copy Yellow Copy - Client Copy SHADED AREAS FOR LABORATORY USE ONLY	18. Horwan				10-14	-907	212 pm	LAB		10/14/96	1415					

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

**REPORT ATTENTION** - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - Applies only to samples submitted by the customer. This data is provided at the customer's discretion

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

#### PRICING AND CHARGES

Prices to be charged for work performed for CLIENT are those currently published in the Coffey Laboratories, Inc. (CLI) standard pricebook. CLIENT must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. All submissions of samples with testing requirements to CLI will be understood to be an agreement for services. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

#### **DELIVERY AND LIABILITY LIMITATIONS**

CLI will analyze samples provided by CLIENT as requested by CLIENT in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP). The maximum total liability assumed by CLI for work performed for CLIENT will in all cases be limited to the cost of the analysis. The specific format of the deliverable goods will be defined by CLIENT to CLI upon transfer of the samples to CLI. This warranty supersedes all other warranties.

#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: October 29, 1996

Job Number: 961024AY
PO Number: Amos Kamerer
Project No: None Provided
Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 10/24/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
961024AY-1	WWT 2,4,6	Waste Water	10/24/96	1500

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc

RECEIVED

OCT 3 1 1996

KOPPERSINUS, INC. PORTLAND; OR



#### **Analytical Data**

Koppers Industry

Job Number: 961024AY

Page Number: 2 of 2

Lab Sample ID: 961024AY-1

Field ID: WWT 2,4,6
Date/Time: 10/24/96 1500
Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	10/25/96	MJP
Total Phenols	EPA 420.1	0.05	0.06	mg/L	10/25/96	RAP

ND means none detected at or above the detection limit listed.



OCT 3 1 1996

KOPPERS INDS., INC. PORTLAND, OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way ● Portland, OR ● 97230 ● (503) 254-1794 ● FAX (503) 254-1452

10/24/96 STORM WATER THS 246 7.1 PH 540F

# Koppers002383

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CENTRAL OREGON BRANCH 827 SW 7th Redmond, OR 97756 PHONE/FAX (541) 548-0972 CORPORATE HEADQUARTERS
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

EASTERN OREGON BRANCH 419 SW 5th Pendleton, OR 97801 PHONE/FAX (541) 276-0385

Attention: AMOS KAMERER  Company KOPPERS INDUSTRES  Mailing Address: 7540 NW St. Helens Rd  Fortland, DD 97210  Phone: 603 286-3681 FAX: 285-2831  Report Instructions (Special - Additional- Job Specific):	Project Project EPA Pr	Name:rotocol Co Sample Tu andard fiority (Additi	ntaine irnare ditona ional	ound  I Fee) Fee) tional Fee)	Rej State FAX Verb. Extra	porting Requess Compliance Fo Results - Prelin Results-Final als Results Report Copy Associated)	Card #: Exp: / _/
Sample ID	Loc.	ID I	#	Coll Date	ection / Time	Media	Analysis Requested Test/Profile
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WWT 2,4,6	-					,	PHENOLS
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Sample Comments	Reilinquis	shed by: (Ple	ue Sigi	1)	Date	Time	Received by: (Sign) Date Time
Eng	es .	res s los e	2		1º/24 D.29		- LAB Mark W. Leed 10-24-96 1521

White Copy-Laboratory Yellow Copy - Customer

COMPLETE THIS FORM PER INSTRUCTIONS ON REVERSE SIDE

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION - Name of the person who receives the laboratory report.

CUSTOMER NAME - Name of the company or individual requesting the analysis.

MAILING ADDRESS - Address of the customer to which the laboratory report and billings should be sent.

REPORT INSTRUCTIONS - A brief description of any special mail or transmittal instruction or address information pertaining to extra report

copies.

PROJECT NAME - Applies to customer project name.

PROJECT NUMBER - Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST STATE COMPLIANCE -

TE COMPLIANCE - Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED

SAMPLE ID - A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter"). This

description will appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle or container...

SAMPLE COLLECTED BY -RELINQUISHED BY - The person who collected the sample(s) signs here.

The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the

sample left his/her possession, etc.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be

same as "Relinquished by" unless the sample(s) was shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

AUTHORIZED CUSTOMER

SIGNATURE. - Form must be signed by authorized representative of customer.

#### TERMS AND CONDITIONS

#### PRICING AND CHARGES

Prices to be charged for work performed for CUSTOMER are those currently published in the COFFEY Laboratories, Inc. (CLI) standard pricebook unless otherwise agreed in writing by the CUSTOMER and CLI. CUSTOMER must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

#### DELIVERY AND LIABILITY LIMITATIONS

The specific format of the goods will be defined by CUSTOMER to CLI upon delivery of the sample(s) to CLI. CLI will analyze samples provided by CUSTOMER as requested by CUSTOMER in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP).

#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CUSTOMER as proprietary and confidential. No CUSTOMER information will be released to third persons without the written request of the CUSTOMER.

#### LIMITATION OF LIABILITY AND WARRANTY

CLI gives no warranty, express or implied, or of fitness for a particular purpose, in connection with its analytical testing or reporting. Any liability of CLI to CUSTOMER or any third party shall be limited to the cost of analysis charged to CUSTOMER.

#### PAST-DUE ACCOUNTS

CUSTOMER agrees to pay 14% per month on all sums past due until paid in full as a service charge and all of CLI's collection costs, including reasonable attorney fees.

#### **EXPERT TESTIMONY AND COURT APPEARANCES**

In the event CUSTOMER requires the further written opinion or testimony of any employee of CLI, including response to a subpoena issued by CUSTOMER or any third person. CUSTOMER agrees to pay such additional fees and expenses as may be reasonably assessed by CLI.

#### ALTERNATIVE DISPUTE RESOLUTION (ADR)

Any disputes arising out of this Agreement or the analytical testing of reporting of CLI shall be settled through mediation and/or arbitration rather than litigation, and the cost of the ADR shall be borne equally by both parties.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.

Rec 11/9

Facility Name/Location if different) NAME Koppers Industries	Facility Name/Location if different) NAME Koppers Industries, Inc. ADDRESS 7540 NW St. Helens Rd.			DISCHAF					OMR)	,						r
ADDRESS 7540 NW St. Hel	ens Rd.			101003			<u> </u>	001				rm Approv				
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Nothing to Report

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Koppers002385

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

PAGE 1 OF 1

Nothing to Report

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.

Koppers002386

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EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.

Koppers002387

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)
CC: J. Holtrop-City of Portland, W.E. Swaeringen-KII

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Nothing to Report

PERMITTEE NAME/ADDRESS (include: Facility: Name/Location if different): NAME KOPPERS INDUSTRIES ADDRESS \$\frac{3}{3}\frac{7540}{7540}\text{ NW St. He} Portland, OR	lens Rd.			ARGE MO (2-16)		SYSTEM (NPDES) RT (DMR) (17-19) 001 HARGE NUMBER	3077 <b>-</b> J	Form Approv OMB No. 204 Approval exp		•	
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cc: J. Holtrop-City of Portland, W.E. Swearingen-KII

#### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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Report Date: June 2, 1996
Job Number: 960528AH
PO Number: Amos Kamerer
Project No: None Provided
Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 05/28/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960528AH-1	WWT 2,4,6	Waste Water	05/28/96	1445

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

RECEIVED

RAK/atc

JUN 5 5 1996

KOPPERSINDS.,INC. PORTLAND.OR

Sincerely,

Rona A. Klueh

Technical Director

Coffey Laboratories, Inc.



#### **Analytical Data**

Koppers Industry

Job Number: 960528AH

Page Number: 2 of 2

Lab Sample ID: 960528AH-1

Field ID: WWT 2,4,6 Date/Time: 05/28/96 1445 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	05/28/96	AB
Total Phenols	EPA 420.1	0.05	0.09	mg/L	05/29/96	RAP

ND means none detected at or above the detection limit listed.



JUN 5 5 1996

KOPPERSINDS...INC.

5/28/91 WW 2,4,6 6,3 PH

# Koppers002394

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CENTRAL OREGON BRANCH 827 SW 7th Redmond, OR 97756 PHONE/FAX (541) 548-0972  Report Attention: Company Name: Mailing Address:	PO Nur Project Project EPA Pr	12423 N Portland (503) 254  mber:  Number:  Number:  otocol Co  cample Tu  andard  diority (Additi	E Wh., OR -179	ers: Y/N O  Dund  I Fee)  Fee)  tional Fee)	ther: Rej FAX FAX Verb Extra	2	EASTERN OREGON BRANCH 419 SW 5th Pendleton, OR 97801 PHONE/FAX (541) 276-0385  FOR LABORATORY USE ONLY Job Number:  Custabbr:  Custabbr:  Custabbr:  Card #:  Exp:  Cash / Check / CC:\$  Billing Code:  L 2 3 4  QC LEVEL:  1 2 3 4  FEDX BUS COURIERS UPS LAB CLIENT MAIL AIR				
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Sample Comments	Relinguis BURA	Wood by Place	****	n) ,	Date 5		(AB)	Received by: (Sign)	Date	Time	

White Copy-Laboratory Yellow Copy - Customer

COMPLETE THIS FORM PER INSTRUCTIONS ON REVERSE SIDE

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

### CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS.

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION - Name of the person who receives the laboratory report.

CUSTOMER NAME - Name of the company or individual requesting the analysis.

MAILING ADDRESS - Address of the customer to which the laboratory report and billings should be sent.

REPORT INSTRUCTIONS - A brief description of any special mail or transmittal instruction or address information pertaining to extra report

copies.

PROJECT NAME - Applies to customer project name.

PROJECT NUMBER - Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST

STATE COMPLIANCE - Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED

SAMPLE ID - A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter"). This

description will appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle or container.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the:

sample left his/her possession, etc.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be

same as "Relinquished by" unless the sample(s) was shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

AUTHORIZED CUSTOMER

SIGNATURE"- Form must be signed by authorized representative of customer.

#### TERMS AND CONDITIONS

#### PRICING AND CHARGES

Prices to be charged for work performed for CUSTOMER are those currently published in the COFFEY Laboratories, Inc. (CLI) standard pricebook unless otherwise agreed in writing by the CUSTOMER and CLI. CUSTOMER must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

#### DELIVERY AND LIABILITY LIMITATIONS

The specific format of the goods will be defined by CUSTOMER to CLI upon delivery of the sample(s) to CLI. CLI will analyze samples provided by CUSTOMER in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP).

#### CONFIDENTIALITY.

CLI will use its best efforts to treat all information regarding work performed for CUSTOMER as proprietary and confidential. No CUSTOMER information will be released to third persons without the written request of the CUSTOMER.

#### LIMITATION OF LIABILITY AND WARRANTY

CLI gives no warranty, express or implied, or of fitness for a particular purpose, in connection with its analytical testing or reporting. Any liability of CLI to CUSTOMER or any third party shall be limited to the cost of analysis charged to CUSTOMER.

#### PAST DUE ACCOUNTS

CUSTOMER agrees to pay 11/2 % per month on all sums past due until paid in full as a service charge and all of CLI's collection costs, including reasonable attorney fees,

#### EXPERT TESTIMONY AND COURT APPEARANCES

In the event CUSTOMER requires the further written opinion or testimony of any employee of CLI, including response to a subpoena issued by CUSTOMER or any third person. CUSTOMER agrees to pay such additional fees and expenses as may be reasonably assessed by CLI.

#### ALTERNATIVE DISPUTE RESOLUTION (ADR)

Any disputes arising out of this Agreement or the analytical testing of reporting of CLI shall be settled through mediation and/or arbitration rather than litigation, and the cost of the ADR shall be borne equally by both parties.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.

Rev: 11/9



#### **Analytical Data**

Koppers Industry

Job Number: 960523D Page Number: 2 of 2

Lab Sample ID: 960523D-1

Field ID: WW 1,3,5 Date/Time: 05/23/96 0730 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	05/23/96	AB
Total Phenols	EPA 420.1	0.05	0.08	mg/L	05/23/96	RAP

ND means none detected at or above the detection limit listed.



MAY 2 8 1996

KOPPERSINDS..INC. PORTLAND, OP



Report Date: May 28, 1996 Job Number: 960523D

PO Number: Amos Kamerer Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 05/23/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960523D-1	WW 1,3,5	Waste Water	05/23/96	0730

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc

RECEIVED

MAY 2 9 1996

KOPPERSINDS.,INC. PORTLAND,OF

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452

5/23/96 WW 1-3-5 58° F C.5 PH

## Koppers002399

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CENTRAL OREGON BRANCH 827 SW 7th Redmond, OR 97756

CORPORATE HEADQUARTERS 12423 NE Whitaker Way Portland, OR 97230

EASTERN OREGON BRANCH 419 SW 5th Pendleton, OR 97801

PHONE/FAX (541) 548-0972			(503) 25·	<u>4-179</u>	4 FAX: (5)	03) 254-145	2		PHONE/FAX (541) 276-0385		
Report Attention: ANOS KAMERE Company Name: Hoppers Ind Inc Mailing Address: 7540 Nrs 57 Helens Portland On 973 Phone: 103 2863681 FAX: 103, 2852  Report Instructions (Special - Additional- Job Specific):	rl. 210	PO Num Project Project EPA Pro  Sta  Pri Ru  En	Number:	ontaine urnare ditona ional	rs: Y/N Cound  I Fee) Fee) ional Fee)	Rej State FAX Verb Extra	porting Request Compliance For Results - Prelin Results-Final als Results Report Copy Associated)	FOR LABORATORY USE ONLY OF Super Configuration of Job Number:  Custabbr:			
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SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - . All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION - N

Name of the person who receives the laboratory report. Name of the company or individual requesting the analysis.

CUSTOMER NAME - MAILING ADDRESS -

Address of the customer to which the laboratory report and billings should be sent,

REPORT INSTRUCTIONS

A brief description of any special mail or transmittal instruction or address information pertaining to extra report

copies.

PROJECT NAME -

Applies to customer project name.

PROJECT NÚMBER -

Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST

STATE COMPLIANCE -

Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED

SAMPLE ID -

A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter"). This description will appear on the report.

COLLECTION DATE

The date on which the sample(s) was/were collected.

COLLECTION TIME

The time at which the sample(s) was/were collected.

MEDIA -ANALYSIS REQUESTED - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.).
Use one line for each analysis or group of analyses associated to a specific bottle or container...

SAMPLE COLLECTED BY -

The person who collected the sample(s) signs here.

RELINQUISHED BY -

The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the

sample left his/her possession, etc.

RECEIVED BY -

The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be

same as "Relinquished by" unless the sample(s) was shipped.

JOB OR SAMPLE REMARKS

General sample or job remarks.

**AUTHORIZED CUSTOMER** 

SIGNATURE -

Form must be signed by authorized representative of customer.

#### TERMS AND CONDITIONS

#### PRICING AND CHARGES

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#### LIMITATION OF LIABILITY AND WARRANTY

CLI gives no warranty, express or implied, or of fitness for a particular purpose, in connection with its analytical testing or reporting. Any liability of CLI to CUSTOMER or any third party shall be limited to the cost of analysis charged to CUSTOMER.

#### PAST DUE ACCOUNTS

CUSTOMER agrees to pay 11/2 % per month on all sums past due until paid in full as;a service charge and all of CLI's collection costs, including reasonable attorney fees.

#### EXPERT TESTIMONY AND COURT APPEARANCES

In the event CUSTOMER requires the further written opinion or testimony of any employee of CLI, including response to a subpoena issued by CUSTOMER or any third person, CUSTOMER agrees to pay such additional fees and expenses as may be reasonably assessed by CLI.

#### ALTERNATIVE DISPUTE RESOLUTION (ADR)

Any disputes arising out of this Agreement or the analytical testing of reporting of CLI shall be settled through mediation and/or arbitration rather than litigation, and the cost of the ADR shall be borne equally by both parties.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.



### **Analytical Data**

Koppers Industry

Job Number: 960514L Page Number: 3 of 3

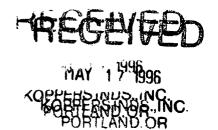
Lab Sample ID: 960514L-2

Field ID: WWT 2,4,6 Date/Time: 05/14/96 0815 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	05/14/96	AB
Total Phenols	EPA 420.1	0.05	0.18	mg/L	05/14/96	RAP

ND means none detected at or above the detection limit listed.





Koppers Industry

Job Number: 960514L Page Number: 2 of 3

Lab Sample ID: 960514L-1

Field ID: WWT 1,3,5 Date/Time: 05/14/96 0815 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	<u>Analyst</u>
Oil & Grease	EPA 413.1	3.	ND	mg/L	05/14/96	AB
Total Phenols	EPA 420.1	0.05	0.10	mg/L	05/14/96	RAP

ND means none detected at or above the detection limit listed.

## RECEIVED

JAT 1 / 1998

KOPPERSINUS.,INC. PORTLAND,OR

Coffey Laboratories, Inc.



Report Date: May 16, 1996 Job Number: 960514L

PO Number: Verbal-Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

### **Analytical Narrative**

The samples were received on 05/14/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960514L-1	WWT 1,3,5	Waste Water	05/14/96	0815
960514L-2	WWT 2,4,6	Waste Water	05/14/96	0815

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

RECEIVED

RAK/atc

MAY 1 7 1996

KOPPERSINDS.,INC. PORTLAND.OR Sincerely

Rona A. Klueh Technical Director 5-14-96

wu 735 PH Temp

135 6.0 64

wu 946

6.4 64

# Koppers002405

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CENTRAL OREGON BRANCH 827 SW 7th Redmond, OR 97756 CORPORATE HEADQUARTERS
12423 NE Whitaker Way
Portland, OR 97230

EASTERN OREGON BRANCH 419 SW 5th Pendleton, OR 97801 PHONE (FAY (541) 276-0385

mber: ne: ol Contain le Turnar rd y (Additon Additional	ial Fee)	Reporting Request State Compliance For FAX Results - Prelimi FAX Results-Final Verbals Results Extra Report Copy (Fees Associated)  Media	Card #: Exp: /	ONEW
ID #				Test/ Profile
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	5-7-760		oil & Grease	
	5-14-96 8	<u> </u>	Thenol	
· .	5-14-96 8 !	5	0il + 61-las. Q.	
	5-14-96 8	3	Phenol	-
	AUTHORIZED CUS	TOMER SIGNATURE	DATE:	
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		<del></del>	LAB 1/4 / 1/2/14 3-14-96	0936
	y: (Please Si	y: (Please Sign)		y: (Please Sign)  Date Time Received by: (Sign)  Date  5-14-96  93

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

### CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

### INSTRUCTIONS

FOR LAB.USE ONLY -All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION -CUSTOMER NAME -

Name of the person who receives the laboratory report. Name of the company or individual requesting the analysis.

MAILING ADDRESS -

Address of the customer to which the laboratory report and billings should be sent.

REPORT INSTRUCTIONS

A brief description of any special mail or transmittal instruction or address information pertaining to extra report

copies.

PROJECT NAME -

Applies to customer project name.

PROJECT NUMBER -

Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST

STATE COMPLIANCE -

Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED

SAMPLE ID -

A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter"). This

description will appear on the report.

COLLECTION DATE -COLLECTION TIME

The date on which the sample(s) was/were collected. The time at which the sample(s) was/were collected.

MEDIA -

This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED

Use one line for each analysis or group of analyses associated to a specific bottle or container...

SAMPLE COLLECTED BY -RELINQUISHED BY -

The person who collected the sample(s) signs here.

The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the

sample left his/her possession, etc.

RECEIVED BY :

The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be

same as "Relinquished by" unless the sample(s) was shipped.

JOB OR SAMPLE REMARKS

General sample or job remarks.

AUTHORIZED CUSTOMER

SIGNATURE, -

Form must be signed by authorized representative of customer

### TERMS AND CONDITIONS

### PRICING AND CHARGES

Prices to be charged for work performed for CUSTOMER are those currently published in the COFFEY Laboratories, Inc. (CLI) standard pricebook unless otherwise agreed in writing by the CUSTOMER and CLI. CUSTOMER must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

### DELIVERY AND LIABILITY LIMITATIONS

The specific format of the goods will be defined by CUSTOMER to CLI upon delivery of the sample(s) to CLI. CLI will analyze samples provided by CUSTOMER as requested by CUSTOMER in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP).

CLI will use its best efforts to treat all information regarding work performed for CUSTOMER as proprietary and confidential. No CUSTOMER information will be released to third persons without the written request of the CUSTOMER.

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Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.

### Coffey Laboratories, Inc. Draft Analytical Data

Koppers Industry

Draft Report Date: 05/15/96

Job Number: 960514L

PO Number: Verbal-Amos Kamer

Project No: None Provided Project Name: None Provided

Lab Sample ID: 960514L-2

Field ID: WWT 2,4,6

Date/Time: 05/14/96 0815 Matrix: Waste Water

BPA Category: Conventional Parameters

		Detection	Analytical		Analysis
Parameter	Method	Limit	Result	Units	Date
Oil & Grease	EPA 413.1	3.	ND	mg/L	05/14/96
Total Phenols	EPA 420.1	0.05	0.18	mg/L	05/14/96

This is a DRAFT report! The data contained in this report may not be complete.

This report has not undergone final quality assurance review.

### Coffey Laboratories, Inc. Draft Analytical Data

Koppers Industry

Draft Report Date: 05/15/96

Job Number: 960514L

PO Number: Verbal-Amos Kamer

Project No: None Provided Project Name: None Provided

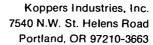
Lab Sample ID: 960514L-1

Field ID: WWT 1,3,5

Date/Time: 05/14/96 0815 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis
Paremeter	Method	Limit	Result	Units	Date
Oil & Grease	EPA 413.1	3.	ND	mg/L	05/14/96
Total Phenols	EPA 420.1	0.05	0.10	ma/L	05/14/96





Telephone: 503-286-3681 Fax: 503-285-2831

May 15, 1996

Amos S. Kamerer, Plant Manager Koppers Industries, Inc. 7540 NW St. Helens Road Portland, Or 97210

Dear Sir:

On May 14, 1996 I did a full walk through inspection of plant operations. Due to record rainfall the past week I found the lower tank farm flooding, all waste water tanks overflowing, and rain still falling.

If this situation continues, we will sustain further damage than we have already to pumps and other equipment. Due to this situation, I started pumping the overflow of rainwater directly to the plant outfall. We will continue this until we are of danger. At this time, we also sampled waste water tanks 1, 3, and 5 also tanks 2, 4, and 6 and requested rush analysis.

Sincerely,

T.J. Turner

General Foreman

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different) NAME KOPPERS INDUS ADDRESS 7540 NW ST. H PORTLAND, OR				(2-16)		SYSTEM (NPDES) RT (DMR) (17-19) OO1 HARGE NUMBER		Form Approv	40-00		<b>₹</b> .
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PARAMETER		(3 Card Only) QU. (46-53)	ANTITY OR LOADIN (54-61)	G	(4 Card Only) (38-45)	QUALITY OR CO (46-53)	NCENTRATION (54-61)		NO.	FREQUENCY	SAMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS	(69-70)
FLOW	SAMPLE MEASUREMENT	30,667		GPD					N/A		EST.
	PERMIT REQUIREMENT										
TEMPERATURE	SAMPLE MEASUREMENT				57	58	59	F	0	18/30	GRAB
	PERMIT REQUIREMENT										
PH	SAMPLE MEASUREMENT	2007 2007 2007			6.2	6.5	6.8	SU	0	18/30	GRAB
	PERMIT REQUIREMENT						#				
OIL & GREASE	SAMPLE MEASUREMENT				N.D.	N.D.	N.D.	MG/L	0	18/30	GRAB
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT				N.D.	.075	.17	MG/L	0	18/30	GRAB
PHENOLS	PERMIT REQUIREMENT										
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	OBTAINI TRUE,	NG THE INFORMATION, ACCURATE AND COM	INDIVIDUALS IMMEDIATE! I BELIEVE THE SUBMI MPLETE. I AM AWARE	TTED INFORMA	ATION IS RE ARE	C. Vanus	1. OH Mel				
R.D. COLLINS, V.P.	SIGNIFIC THE PO	ANT PENALTIES FOR SSIBILITY OF FINE AND	SUBMITTING FALSE INF D IMPRISONMENT. SEE under these statutes ma	ORMATION, IN	CLUDING O1 AND SIGNATE	JRE OF PRINCIPA			681	96 0	5 06
TYPED OR PRINTED  COMMENT AND EXPLANATION OF AN	\$10,000	and or maximum imprison	ment of between 6 months		OFFIC	ER OR AUTHORIZ	ED AGENT AR	DE NUMB	ER	YEAR M	O DAY

The Second Quarter PAH results per attached.

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

														<u> </u>
					MONTH	Apail	YEAR 9							
					FLOW			Days of						
	WWT-1	WWT-2	WWT-3	WWT-4	WWT-5	WWT-6	TOTAL	BMERGENEY	#DAYS IN	<b>+.</b> -01	G.P.D.			ļ
GLS. PER TANK	45,000						TOIME	80,000/day	MONTH		DISCHARG	E		<b>†</b>
# OF PUMPINGS		11			11	1)		6						
GALS.PUMPED	90,000	90,000	90,000	90,000	40,000	40,000	440,000	/	30	920,000	30,667			
					SAMPLE C	ONCENTRA	TION LEVE	LS			AVG.	MIN.	MAX.	UNIT
TEMPERATURES		58 59									58	57	59	OF
PH OIL & GREASES		16,5 6,2 NO NO	<del>                                     </del>	<del>  </del>		<b> </b>				<del></del>	6.5 NO	6.2 NO	1.8 NO	SU MG/L
PHENOLS		NO NO									,015	NO	.17	MG/L
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		DATE SAM	PLE TAKEN	4 25			RESULTS_	787						
					1		MUST BE LE		d)					-



Koppers Industry

Job Number: 960425B

Page Number: 4 of 4

Lab Sample ID: 960425B-2

Field ID: WW 2,4,6 Date/Time: 04/25/96 0730 Matrix: Waste Water

EPA Category: Extractable Organics

Analysis Performed: EPA 8310; Polynuclear Aromatic Hydrocarbons by HPLC.

Analysis Date: 04/25/96 Analyst: DJM

Detection	Laboratory	Analytical
<u>Limit</u>	Blank	Result
25.	ND	ND
25.	ND	ND
5.	ND	ND
0.5	ND	19.
1.	ND	21.
0.5	ND	23.
1.	ND	16.
0.5	ND	17.
5.	ND	20.
2.5	ND	4.
5.	ND	18.
25.	ND	ND
2.5	ND	13.
25.	ND	ND
5.	ND	7.
5.	ND	29.
	Limit 25. 25. 5. 0.5 1. 0.5 1. 0.5 5. 2.5 5. 22.5 5.	Limit   Blank

Results expressed as  $\mu g/l$  unless otherwise noted.

ND means none detected at or above the detection limit listed.

# RECEIVED

MAY 0 | 1996

KOPPERSINUS, INC. PORTLAND, OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way ● Portland, OR ● 97230 ● (503) 254-1794 ● FAX (503) 254-1452

April 25, 1996

Amos S. Kamerer Koppers Industries, Inc. 7540 NW St. Helens Rd. Portland, OR 97210

Dear Sir:

On April 25, 1996 I came in at 6:30 am to start plant operations. Upon doing a full-plant walk-through inspection, I found the lower tank farm flooding, all waste water tanks overflowing, and rain still falling.

If this situation continues, we are in danger of losing pumps and equipment, and a possible shut down of operations. I started pumping the overflow of rainwater directly to the plant outfall.

We, at this time also sampled all waste water tanks and requested rush analysis.

Sincerely,

General Foreman

T.J. Turner



Telephone: 503-286-3681 Fax: 503-285-2831

12 April 1996

Amos S. Kamerer Koppers Industries, Inc 7540 NW St. Helens Rd. Portland, OR 97210

Dear Sir:

On April 11, 1996 I came in at 6:30 a.m. to start plant operations. Upon doing a full-plant walk-through inspection, I found the lower tank farm flooding, all waste water tanks overflowing, and rain still falling.

If this situation continues, we are in danger of losing pumps and equipment, and a possible shut down of operations. I started pumping the overflow of rainwater directly to the plant outfall.

We at this time also sampled all waste water tanks and requested rush analysis.

Sincerely,

T.J. Turner

General Foreman

Exposed - No samples were token and analysed.

4/25/96 WW 2,4,6 58° F 6,5 PH

4/25/96 WW 1.3-5 59° F 6,2 P.H.

Marin Alberta Carlo response or Alberta de La La La Labora Algerta de Maria de La Lagraga de La

# Koppers002417

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CENTRAL OREGON BRANCH 827 SW 7th Redmond, OR 97756 PHONE/FAX (541) 548-0972

CORPORATE HEADQUARTERS
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

EASTERN OREGON BRANCH 419 SW 5th Pendleton, OR 97801 PHONE/EAX (541) 276-0385

Report Attention: Amos Kamerer		PO Num	ber:		-				FOR LABORATORY USE ONLY	Page _ of2	
_		Project	Number:_						FOR LABORATORY USE ONLY Job Number:	+257	5
Name: 40000 CRS ING AN	<u>-C</u> ]	Project 1	Name:						II II		□NEW
Mailing 7546 Nw 51 Helen	S KA	EPA Pro	tocol Cor	taine	rs: Y/N C	ther:			Custabbr:		NEW
Portland Or 9721	//>	Sa	mple Tu	maro	und	Rep	orting Reque	st	□ VISA □ M/C Cardholder:		
		☐ Star	ndard				Compliance F		Card #:	_ Exp:/	
Phone: (503) 2863681 FAX: (603) 2852	831	☐ Prie	ority (Add	litona	Fee)	☐ FAX	Results - Preli	minary	Cash / Check / CC:\$	#:	
Report Instructions (Special - Additional- Job Specific):		Rus	sh (Additio	onal i	Feel	☐ FAX	Results-Final		Billing Code: 1 2 3 4		
* *		_				=	ls Results				
					ional Fee)		Report Copy Associated)		QC LEVEL: 1 2 3 4		
		Initials:_			<del></del>	(1003)			FEDX BUS COURIERS UPS LA	B CLIENT MA	IL AIR
Sample ID		Loc.	ID	#	Coll Date	ection / Time	Media		Analysis Requested		Test/ Profile
ww 1,3,5		.			4/25	0730		0	1/Grease		
								····			
w, w 1,3,5					4/25	0730		12/	hands	1.00	
		:							/		
ww 2,4,6					4/25	0730		0,1	1/ Grease		1
7-1				•		7,20		<u> </u>			1
					W/ -	8770	- "	1	2015		+
ww 2,4,6					4/25	0730		ne	1013	1 ,	<u> </u>
					<del></del>						
W.W. 2,4,6 Sampled By: Chr. 15 Johe				n	4/25	0730		1	A.H.		
Sampled By: Chre15 Johe		/	4//:		AUTHORIZE	D CUSTOMER	SIGNATURE		DATE:		
Sample Comments		Relinquish	ed by (plea	e Sign	)	Date	Time	17	Received by: (Sign)	Date	Time
	Mille	W/1	110			425		1/1	Middle a	925-96	8.05
	Mu	77 L	Pur			425	48 8.63		10 JHB 10		00
		00						LAB	MANOS ONNO	1 2 f/2	XXX
White Corn Leboratory Vellow Corn - Customer	COMPI	Dente 1	ruic iv	)DI	I DED D		ONS ON I		SE CINE	1104	16

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SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

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REPORT ATTENTION Name of the person who receives the laboratory report.

CUSTOMER NAME -Name of the company or individual requesting the analysis.

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copies.

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Applies only to samples submitted by the customer for its internal identification purposes. PROJECT NUMBER -

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SAMPLE ID -A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter"). This

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ANALYSIS REQUESTED -Use one line for each analysis or group of analyses associated to a specific bottle or container.

The person who collected the sample(s) signs here. SAMPLE COLLECTED BY

RELINQUISHED BY -The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the

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RECEIVED BY The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be

same as "Relinquished by" unless the sample(s) was shipped.

JOB OR SAMPLE REMARKS -General sample or job remarks.

**AUTHORIZED CUSTOMER** 

SIGNATURE -Form must be signed by authorized representative of cus

### TERMS AND CONDITIONS

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Report Date: April 30, 1996

Job Number: 960425B

PO Number: Verbal - Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

### **Analytical Narrative**

The samples were received on 04/25/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960425B-1	WW 1,3,5	Waste Water	04/25/96	0730
960425B-2	WW 2,4,6	Waste Water	04/25/96	0730

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

RECEIVED

RAK/atc

MAY 6 1 1998

KOPPERSINUS, INC. PORTLAND, OR

Sincerely,

Rona A. Klueh Technical Director

Coffey Laboratories, Inc.



Koppers Industry

Job Number: 960425B Page Number: 2 of 4

Lab Sample ID: 960425B-1

Field ID: WW 1,3,5 Date/Time: 04/25/96 0730 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	<u>Limit</u>	Result	Units	<u>Date</u>	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	04/25/96	AB
Total Phenols	EPA 420.1	0.05	ND	mg/L	04/25/96	RAP

ND means none detected at or above the detection limit listed.

## **RECEIVED**

MAY 0 1 1996

KOPPERS INDS.,INC. PORTLAND,OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452



Koppers Industry

Job Number: 960425B Page Number: 3 of 4

Lab Sample ID: 960425B-2

Field ID: WW 2,4,6 Date/Time: 04/25/96 0730

Matrix: Waste Water

EPA Category: Conventional Parameters

		Detectio	n Analytical		Analysis	
Parameter	Method	Limit	Result	<u>Units</u>	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	04/25/96	AB
Total Phenols	EPA 420.1	0.05	ND	mg/L	04/25/96	RAP

ND means none detected at or above the detection limit listed.



MAY 0 1 1996

KOPPERSINUS, INC. PORTLAND, OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452

4/1/96 WWT1,35 550 F 6.8 PH

4/1/96 wwt 2,4,6 57°F 6,5P1

# Koppers002424

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

Report Attention: AMOS KANCH Company KOPPERS Mailing Address: 7540 PW St Mailing Addre	Cus RD 97210 285-3831	PO Nur Project Project EPA Pr Sta	12423 N Portland (503) 25- mber:  Number: Name:  Ottocol Co Sample To andard  iority (Addit	TE With the New York of the Ne	hitaker Way 1. 97230 24 FAX: (50 ers: Y/N Cound	Continue	2	Format iminary	Custabbi Card #:_ Cash / C Billing C QC LEV	419 SW 5th Pendleton, OR PHONE/FAX (5  BORATORY USE ONL sher:  A M/C Cardholder  Check / CC:\$  Code: 1 2 3  EL: 1 2 3	Page AR 2 POP S Exp: /	NEW /
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White Copy-Laboratory Yellow Copy - Customer

COMPLETE THIS FORM PER INSTRUCTIONS ON REVERSE SIDE

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION - Name of the person who receives the laboratory report.

CUSTOMER NAME - Name of the company or individual requesting the analysis.

MAILING ADDRESS - Address of the customer to which the laboratory report and billings should be sent.

REPORT INSTRUCTIONS - A brief description of any special mail or transmittal instruction or address information pertaining to extra report

copies.

PROJECT NAME - Applies to customer project name.

PROJECT NUMBER - Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST

STATE COMPLIANCE - Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED

SAMPLE ID - A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter"). This,

description will appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED Use one line for each analysis or group of analyses associated to a specific bottle or container...

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - 🛴 🦂 The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the

sample left his/her possession, etc.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be

same as "Relinquished by" unless the sample(s) was shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

AUTHORIZED CUSTOMER

SIGNATURE - Form must be signed by authorized representative of customer.

### TERMS AND CONDITIONS

### PRICING AND CHARGES

Prices to be charged for work performed for CUSTOMER are those currently published in the COFFEY Laboratories, Inc. (CLI) standard pricebook unless otherwise agreed in writing by the CUSTOMER and CLI. CUSTOMER must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

### DELIVERY AND LIABILITY LIMITATIONS

The specific format of the goods will be defined by CUSTOMER to CLI upon delivery of the sample(s) to CLI. CLI will analyze samples provided by CUSTOMER in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP).

### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CUSTOMER as proprietary and confidential. No CUSTOMER information will be released to third persons without the written request of the CUSTOMER.

### LIMITATION OF LIABILITY AND WARRANTY

CLI gives no warranty, express or implied, or of fitness for a particular purpose, in connection with its analytical testing or reporting. Any liability of CLI to CUSTOMER or any third party shall be limited to the cost of analysis charged to CUSTOMER.

### PAST DUE ACCOUNTS

CUSTOMER agrees to pay 11/2 % per month on all sums past due until paid in full as a service charge and all of CLI's collection costs, including reasonable attorney fees.

### EXPERT TESTIMONY AND COURT APPEARANCES

In the event CUSTOMER requires the further written opinion or testimony of any employee of CLI, including response to a subpoena issued by CUSTOMER or any third person, CUSTOMER agrees to pay such additional fees and expenses as may be reasonably assessed by CLI.

### ALTERNATIVE DISPUTE RESOLUTION (ADR)

Any disputes arising out of this Agreement or the analytical testing of reporting of CLI shall be settled through mediation and/or arbitration rather than litigation, and the cost of the ADR shall be borne equally by both parties.

### APPLICABLE LAW

Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.



## RECEIVED

APR 0 9 1996

KOPPERSINDS, INC. PORTLAND.OR

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663 Report Date: April 5, 1996
Job Number: 960401AR
PO Number: Amos Kamerer
Project No: None Provided
Project Name: None Provided

### **Analytical Narrative**

The samples were received on 04/01/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960401AR-1	WWT 1,3,5	Waste Water	04/01/96	1535
960401AR-2	WWT 2,4,6	Waste Water	04/01/96	1535

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc



Koppers Industry

Job Number: 960401AR

Page Number: 2 of 3

Lab Sample ID: 960401AR-1

Field ID: WWT 1,3,5 Date/Time: 04/01/96 1535 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	04/02/96	AB
Total Phenols	EPA 420.1	0.05	0.17	mg/L	04/02/96	RAP

ND means none detected at or above the detection limit listed.



Koppers Industry

Job Number: 960401AR Page Number: 3 of 3

Lab Sample ID: 960401AR-2

Field ID: WWT 2,4,6 Date/Time: 04/01/96 1535 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	<u>Analyst</u>
Oil & Grease	EPA 413.1	3.	ND	mg/L	04/02/96	AB
Total Phenols	EPA 420.1	0.05	0.13	mg/L	04/02/96	RAP

ND means none detected at or above the detection limit listed.

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# Koppers002432

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CENTRAL OREGON BRANCH 827 SW 7th Redmond, OR 97756 PHONE/FAX (S41) 548-0972  Report Attention: Amas hanerer Company Name: Amas Find Inc Mailing Address: 7540 Nm 51 He/ems Phone: 603 286768/ FAX: 503, 28528  Report Instructions (Special - Additional- Job Specific):	EPA P	12423 NE N Portland, C (503) 254-1: mber: Number: Name: rotocol Contai	iners: Y/N O around onal Fee) ditional Fee)	Dither:   Rep   State   FAX   Verb:   Extra	52	Card #:   Exp: /
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White Copy-Laboratory Yellow Copy - Customer

COMPLETE THIS FORM PER INSTRUCTIONS ON REVERSE SIDE

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PROJECT NAME -Applies to customer project name.

PROJECT NUMBER Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST

Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED STATE COMPLIANCE -

SAMPLE ID -A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter"). This

description will appear on the report.

COLLECTION DATE . The date on which the sample(s) was/were collected.

**COLLECTION TIME** The time at which the sample(s) was/were collected. MEDIA -

This is a description of the sample media (e.g., drinking water, waste water, soil, etc.) Use one line for each analysis or group of analyses associated to a specific bottle or container. ANALYSIS REQUESTED

The person who collected the sample(s) signs here. SAMPLE COLLECTED BY -

RELINQUISHED BY -: The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the

sample left his/her possession, etc.

The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be RECEIVED BY -

same as "Relinquished by" unless the sample(s) was shipped.

JOB OR SAMPLE REMARKS -General sample or job remarks.

**AUTHORIZED CUSTOMER** 

· Form must be signed by authorized representative of customer.

### TERMS AND CONDITIONS

### PRICING AND CHARGES

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Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.



## RECEIVED

MAR 26 1996

KOPPERSINDS.,INC. PORTLAND.OR

Report Date: March 25, 1996

Job Number: 960321A

PO Number: Amos Kamerer Project No: None Provided

Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

### **Analytical Narrative**

The sample was received on 03/21/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960321A-1	WWT 2,4,6	Waste Water	03/21/96	0800

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh
Technical Director

Nova/Clml

RAK/atc



Koppers Industry

Job Number: 960321A

Page Number: 2 of 2

Lab Sample ID: 960321A-1

Field ID: WWT 2,4,6 Date/Time: 03/21/96 0800 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	<u>Analyst</u>
Oil & Grease	EPA 413.1	3.	ND	mg/L	03/21/96	AB
Total Phenols	EPA 420.1	0.05	0.13	mg/L	03/22/96	RAP

ND means none detected at or above the detection limit listed.

3/13/96

WW/ 1,3,5 54°F 1,6 PH 3/13/96 WWT 4,4,6 540 FH

# Koppers002438

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Amos Hamerer Company Name: Koppers Ind Inc	Project Name Project Numb	: :t					FOR LABORATORY USE ONLY  July Number: 1069603/	Pagear
Address: 7540 NwgTHelens,	——/II/ II	umber:					Custabbre	□NEW
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Phone: (503) 286 3681 FAX: (503) 28528	<i>′3 /</i> □ St	andard		☐ FAX	(T-35)		Card #:	
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WWT 13,5			3/13/90	11		011	& Grease	
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SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

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REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.),

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

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RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

## CONDITIONS

#### PRICING AND CHARGES

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#### CONFIDENTIALITY

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#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: March 15, 1996 Job Number: 960313AM

PO Number: Verbal - Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

## **Analytical Narrative**

The samples were received on 03/13/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960313AM-1	WWT 2,4,6	Waste Water	03/13/96	1400
960313AM-2	WWT 1,3,5	Waste Water	03/13/96	1400

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh

**Technical Director** 

RAK/atc

RECEIVED

MAR 20 1996

KOPPERSINDS, INC. PORTLAND.OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way ● Portland, OR ● 97230 ● (503) 254-1794 ● FAX (503) 254-1452



Koppers Industry

Job Number: 960313AM

Page Number: 2 of 3

Lab Sample ID: 960313AM-1

Field ID: WWT 2,4,6 Date/Time: 03/13/96 1400 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	5.	mg/L	03/13/96	AB
Total Phenols	EPA 420.1	0.05	0.13	mg/L	03/14/96	RAP



MAR 20 1996

KOPPERSINDS, INC. PORTLAND. OR



Koppers Industry

Job Number: 960313AM

Page Number: 3 of 3

Lab Sample ID: 960313AM-2

Field ID: WWT 1,3,5 Date/Time: 03/13/96 1400 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	<u>Analyst</u>
Oil & Grease	EPA 413.1	3.	3.	mg/L	03/13/96	AB
Total Phenols	EPA 420.1	0.05	0.08	mg/L	03/14/96	RAP

# RECEIVED

MAR 20 1996 COPPERSINDS, INC.

Coffey Laboratories, Inc.

WWT 2,4,6 3/4/96 54° F

# Koppers002444

PORTLAND BRANCH

(503) 254-1794 FAX: (503) 254-1452

12423 NE Whitaker Way

Portland, OR 97230

# COFFEY LABORATORIES, INC.

CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

							· ·		
Report Attention: Amos Kanere, Company Name: Koppens Ind.	N Pi	roject Iame: roject Iumber:					FOR LABORATORY USE ON Job Number:	0304AQ	_af
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Phone: (503) 28.63681 FAX: (503) 28528	3/	Standard		☐ FAX (T	-35)		Card #:		
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SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

**REPORT ATTENTION** - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

**PROJECT NUMBER** - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

**SAMPLE COLLECTED BY** - The person who collected the sample(s) signs here.

**RELINQUISHED BY** - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession.

**RECEIVED BY** - The person who receives the sample(s) signs here and fills in the date/time received. The date and

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JOB OR SAMPLE REMARKS - General sample or job remarks.

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#### APPLICABLE LAW

Legal relatters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: March 7, 1996 Job Number: 960304AQ PO Number: Amos Kamerer Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

## **Analytical Narrative**

The sample was received on 03/04/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960304AQ-1	WWT 2,4,6	Waste Water	03/04/96	1400

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Nonel Unl

Rona A. Klueh Technical Director

RAK/atc

RECEIVED

MAR 1 1 1996

KOPPERSINDS, INC. PORTLAND. OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452



Koppers Industry

Job Number: 960304AQ Page Number: 2 of 2

Lab Sample ID: 960304AQ-1

Field ID: WWT 2,4,6 Date/Time: 03/04/96 1400 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	<u>Analyst</u>
Oil & Grease	EPA 413.1	3.	ND	mg/L	03/04/96	AB
Total Phenols	EPA 420.1	0.05	ND	mg/L	03/05/96	RAP

ND means none detected at or above the detection limit listed.

# RECEIVED

MAR 1 1 1996

KOPPERS INDS., INC. PORTLAND. OR

Coffey Laboratories, Inc.

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Telephone: 503-286-3681 Fax: 503-285-2831

February 6, 1996

Amos S. Kamerer Koppers Industries, Inc. 7540 NW St. Helens Rd. Portland, OR 97210

Dear Sir:

On this date I have done a full walk thought inspection of plant operations and I find the lower tank farm flooding, all waste water tanks overflowing, and rain still falling.

If this situation continues, we will sustain further damage than we already have to the pumps, motors and other equipment. Due to this situation, I started pumping the overflow of rainwater directly to the plant outfall. We will continue this until we are out of danger.

Sincerely,

T. J. Turner

General Foreman

Flood conditions developed by the end of day 2/7/96. CAHED 911 Am 2/8/96. The fine department lent us 1200' of 5" fixe hose that we connected to the 6" pontable pump we had rented and we dischanged directly to the River. I call DEQ - Elliot Zais and left directly to the River. I call DEQ - Elliot Zais and left A message on his voice mail about what we were doing. A message on his voice mail about what we were doing. This pumping ended about Noon on 2/9/96. No product dischange this pumping ended about Noon on 2/9/96. No product dischange occurred during this Emengency, only storm water accumulation occurred during this Emengency, only storm water Accumulation was pischanged.

WW # 2-4-6 2-19-96 580 F 6.5 14

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# Koppers002452

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Amos Ramere Company Name: Kollers Ind I Address: 7540 Nw 57 He/s PORTIANA OR 972/ Phone: (503) 2863681 FAX: (503) 2853 Report Instructions:	NC.	Standa Priorit Rush	er: nple Turn .rd y (1.5x Su	i. Fee)	☐ FAX (T☐ Verbals	(T-1157) eport Copy (T-l Associated)		FOR LABORATORY USE ONL Job Number: 7/0 03/5  Cinstabby:  Cinstabby:  Card #:  Cash / Check: 5  Billing Code: 1 2 3  QC LEVEL: 1 2 3  FEDX BUS COURIER U	1 H R	DNEW
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SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

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PROJECT NUMBER Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

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COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

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JOB OR SAMPLE REMARKS - General sample or job remarks.

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#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



RAK/atc

Report Date: February 22, 1996

Job Number: 960219AR
PO Number: Amos Kramerer
Project No: None Provided
Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

## **Analytical Narrative**

The sample was received on 02/19/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960219AR-1	WWT 2,4,6	Waste Water	02/19/96	1430

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

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Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RECEIVED

113 2 6 1996

KOPPERS INDS., INC. PORTLAND, OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way ● Portland, OR ● 97230 ● (503) 254-1794 ● FAX (503) 254-1452



Koppers Industry

Job Number: 960219AR

Page Number: 2 of 2

Lab Sample ID: 960219AR-1

Field ID: WWT 2,4,6 Date/Time: 02/19/96 1430 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	5.	mg/L	02/19/96	AB
Total Phenols	EPA 420.1	0.05	0.26	mg/L	02/20/96	RAP

# RECEIVED

FEB 2 6 1996

KOPPERS INDS., INC. PORTLAND, OR

2-20-96 WWT1-3-5 58°F 6,7 PH

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# Koppers002457

PORTLAND BRANCH

12423 NE Whitaker Way

(503) 254-1794 FAX: (503) 254-1452

Portland, OR 97230

COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: AMOS Kamere Company Name: Koppsexs Ind Ind Address: 1840 Nw ST Helens Land, OR 97210  Phone: (503) 2863681 FAX: 503) 283 28  Report Instructions:	Project Number: PO Number: Sample	td. Fee)	FAX (	(T-1157) Report Copy ( Associated)		FOR LABORATORY USE ONLY  Job Number:	77	□NEW
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Sampled by: (Please Print)	Relinquished by	Please Sign)	Date	Tim	e /	Received by: (Sign)	Date	Time
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SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

**REPORT ATTENTION** - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

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REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

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**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

**PROJECT NUMBER** - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIFLD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

**RELINOUISHED BY** - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

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RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

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JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

#### PRICING AND CHARGES

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#### **DELIVERY AND LIABILITY LIMITATIONS**

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#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: February 22, 1996

Job Number: 960220AK
PO Number: Amos Kamerer
Project No: None Provided
Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

## **Analytical Narrative**

The sample was received on 02/20/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960220AK-1	WWT 1-3-5	Waste Water	02/20/96	1445

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc

RECEIVED

FEB 26 1998

KOPPERS INDS., INC. PORTLAND, OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452



Koppers Industry

Job Number: 960220AK

Page Number: 2 of 2

Lab Sample ID: 960220AK-1

Field ID: WWT 1-3-5 Date/Time: 02/20/96 1445 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	<u>Method</u>	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	4.	mg/L	02/20/96	AB
Total Phenols	EPA 420.1	0.05	0.22	mg/L	02/21/96	RAP

# RECEIVED

FEB 26 1996

KOPPERS INDS., INC. PORTLAND, OR

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FERMITTEE NAME/ADDRESS (Inclu Facility Name/Location if different) NAME Koppers Industr	ies, Inc.	~	DISCH	ARGE MO (2-16)	HARGE ELIMINATION	N SYSTEM (NPDES) DRT (DMR) (17-19)	9				*
ADDRESS 7540 NW St. He			<del></del>	1003		1		Form Approve		n4	
Portland, Or	9/210		PERM	IT NUMBER	DISCI	HARGE HUMBER	3077 <b>-</b> J	Approval exp			
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(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX 62-63)	(64-68)	(69-70)
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	SAMPLE MEASUREMENT				50	58	64	o <sub>F</sub>	0	12/31	Grab
Temperature	PERMIT REQUIREMENT										
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рН	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT				N.D.	1.5	6.0	MG/L	0	12/31	Grab
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TYPED OR PRINTED	and m	r maximum imprisonment	nder these statutes may u of between 6 months and 5	nclude finex up vearx.)	117 0 117 11777	CER OR AUTHOR	AR AGENT	EA NUMBE		YEAR M	
COMMENT AND EVEL ANATION OF	ANY VIOLATIONS (	Reference all attachme	nts here)								

1st Quarter PAH test results are attached.

## MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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# Koppers002464

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: AMOS Kamerer Company Name: Koppers Industries In Address: 7540 NW St Helens Roc	ic	Project Name: Project Number:_ PO Numb						FOR LABORATORY USE ONLY Job Number: 4/2 / 6/2/ ( ) Contribut:		of
Portland OR 97210  Phone: (503) 286-3681 FAX: (503) 285-283  Report Instructions:		Sample Turnaround  Standard  Priority (1.5x Std. Fee)  Rush (2x Std. Fee)  Emergency (3x Std. Fee)			Reporting Request  FAX (T-35)  Verbals (T-1157)  Extra Report Copy (T-1402) (Fees Associated)  Initials:			Card ## Cash / Chack: \$  Billing Code: 1 2 3 4  QC LEVEL: 1 2 3 4  FEDX BUS COURIER UPS		#:
Sample ID  WWT 2:46 Composite	` `	Loc.	iD	Colle Date		Media MU Cul O	y Pho	Analysis Requested		Test/Prufile
WWT 2.4.6 Composite				1/9/96	8:30	HOL	011	Ł Grease		
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Sampled by: (Please Print)	<del></del>		by: (Please		<del></del>		Time .	Received by: (Sign)	Date	Time
Dennis Stewart  White Copy - Laboratory Copy  Yellow Copy - Client Copy	Lesia	is ?	Stewn	ut	119	196/8:	30 am	Fran J My	1/9/96	8:30a
SHADED AREAS FOR LABORATORY USE ONLY	¥160	212	M		1/9	196 10	:Olbusan	wide Hegas	19-96	1000
SUBMISSION OF SAMPLES WITH TEST SERVICES IN ACCORDANCE WITH THI	ING R E COI	REQUI NDITI	iremi Øns i	ENTS T	O CLI ON TH	WILL B E BACI	E UNDE	RSTOOD TO BE AN AGRE E CLIENT COPY.	EMENT F	OR

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

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REPORT ADDRESS -	Address of the company or individual requesting the analysis. (Address where report should be mailed)
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PROJECT NAME -	Applies to customer project name. This data is provided at the customer's discretion.
PROJECT NUMBER -	Applies only to samples submitted by the customer. This data is provided at the customer's discretion.
FIELD IID -	A short description of the sample point (e.g., "Effluent from sand filter"). This description will appear on the report.
Collection date -	The date on which the sample(s) was/were collected.
COLLECTION TIME -	The time at which the sample(s) was/were collected.
MIEDIA -	This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)
analysis requested -	Use one line for each analysis or group of analyses associated to a specific bottle.
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Job or sample remarks	- General sample or job remarks.

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#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: January 11, 1996

Job Number: 960109H

PO Number: Verbal-Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

## Amalytical Narrative

The sample was received on 01/09/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960109H-1	WWT 2-4-6 Composite	Waste Water	01/09/96	0830

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

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Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely.

Rona A. Klueh Technical Director

RAK/atc

RECEIVED

JAN 12 1995

KOPPERS INDS., INC. PORTLAND OF

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452



Koppers Industry

Job Number: 960109H

Page Number: 2 of 2

Lab Sample ID: 960109H-1

Field ID: WWT 2-4-6 Composite

Date/Time: 01/09/96 0830 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	<u>Analyst</u>
Oil & Grease	EPA 413.1	3.	ND	mg/L	01/09/96	DJM
Total Phenois	EPA 420.1	0.05	0.10	mg/L	01/09/96	PDB

ND means none detected at or above the detection limit listed.



JAN 12 1995

KOPPERS INDS., INC. PORTLAND, OR

Coffey Laboratories, Inc.

1-15.96 WWT 1-3-5 PH 6=3 55° F

# Koppers002469

PORTLAND BRANCH

12423 NE Whitaker Way Portland, OR 97230

(503) 254-1794 FAX: (503) 254-1452

COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Amos Kamerer Company Name: Moppers Ind Address: 7540 Nw 57He/ens/ Box Tland One 97210-3663 Phone: (503) 286368/ FAX: (503) 283283 Report Instructions:	Stand  Prior	ber: umple Turr	d. Fee)	☐ FAX	als (T-1157	) py (T-1402)	Jeb! Custi Vi Card	Number: // abbr: ISA M/C I/: // Check: \$ g Code: 1	RY USE ONL V A 7	(20)/	5-7	ONEW
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White Copy - Labóratory Copy Yellow Copy - Client Copy SHADED AREAS FOR LABORATORY USE ONLY	WOR (II)	The same	ee				MAA Lun	tall	Suck		1/15-10	00

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

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**PROJECT NUMBER** - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.).

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

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RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

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JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

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### CONFIDENTIAL

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLT for CLIEND will be construed and interpreted in accordance with the laws for the state of Oregon.



# RECEIVED

JAN 22 1996

Report Date: January 18, 1996

Job Number: 960115C

KOPPERS INDS., INC. PORTLAND, OR

PO Number: Verbal-Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

## **Analytical Narrative**

The sample was received on 01/15/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960115C-1	WW 1,3,5	Waste Water	01/15/96	0800

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc1



Koppers Industry

Job Number: 960115C

Page Number: 2 of 3

Lab Sample ID: 960115C-1

Field ID: WW 1,3,5 Date/Time: 01/15/96 0800 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	<u>Uni</u> ts	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	01/15/96	AB
Total Phenols	EPA 420.1	0.05	0.05	mg/L	01/15/96	PDB

ND means none detected at or above the detection limit listed.

# RECEIVED

JAN 22 1996

KOPPERS INDS., INC. PORTLAND, OR



Koppers Industry

Job Number: 960115C

Page Number: 3 of 3

Lab Sample ID: 960115C-1

Field ID: WW 1,3,5 Date/Time: 01/15/96 0800 Matrix: Waste Water

EPA Category: Extractable Organics

Analysis Performed: EPA 8310; Polynuclear Aromatic Hydrocarbons by HPLC.

Analysis Date: 01/15/96 Analyst: DJM

	Detection	Laboratory	Analytical
Parameter	Limit	Blank	Result
Acenaphthene	6.	ND	21.
Acenaphthylene	6.	ND	ND
Anthracene	6.	ND	ND
Benzo(a)anthracene	0.12	ND	5.4
Benzo(b)fluoranthene	0.12	ND	8.0
Benzo(k)fluoranthene	0.06	ND	2.9
Benzo(g,h,i)perylene	0.36	ND	3.3
Benzo(a)pyrene	0.12	ND	4.1
Chrysene	0.6	ND	2.9
Dibenzo(a,h)anthracene	0.36	ND	3.5
Fluoranthene	0.6	ND	5.2
Fluorene	45.	ND	ND
Indeno(1,2,3-cd)pyrene	0.6	ND	3.2
Naphthalene	6.	ND	ND
Phenanthrene	6.	ND	ND
Pyrene	2.4	ND	ND

Results expressed as  $\mu g/l$  unless otherwise noted.

ND means none detected at or above the detection limit listed.

# RECEIVED

JAN 22 1996

KOPPERS INDS., INC. PORTLAND, OR

Coffey Laboratories, Inc.

1 24 96 WWT 2.4.5 bl

# Koppers002475

Sampled by: (Please Print)

Yellow Copy - Client Copy

uener

SHADED AREAS FOR LABORATORY USE ONLY

White Copy - Laboratory Copy

PORTLAND BRANCH

12/22 NE Whiteless Was

# COFFEY LABORATORIES, INC.

CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 297 CF Firet

CLIENT

Date

Time

MAIL

BUS COURIER UPS LAB,

FEDX

Received by: (Sign)

Portland, OR 97230 (503) 254-1794 FAX: (503) 254-1452			Pendleton, OR 97801 (503) 276-0385
Report AMOS RAMEREIT	Project Name:		FOR LABORATORY USE ONLY Page of
Company Name: KOSPERS IND	Project Number:		Job Number: <u>UE960/24 I -/</u>
Address: 7540 NW. 5THELENS RA	PO Number:		Custabbr: OPPU 5
Anthund Oxp 97210	Sample Turnaround	Reporting Request	UVISA UM/C Expères:
Phone: (503) 2863681 FAX: (503) 285253/	☐ Standard	☐ FAX (T-35)	Card #:
Report Instructions:	Priority (1.5x Std. Fee)	☐ Verbals (T-1157)	Cash / Check: \$#:#:#:#:#:#:
·	Rush (2x Std. Fee)	Extra Report Copy (T-1402) (Fees Associated)	Billing Code: 1 2 3 4

Emergency (3x Std. Fee)

Relinquished by: (Please Sign)

a/hQ

Sample ID .	Loc. ID	Collection Date / Time	Media	Analysis Requested	Test/Profile
ww1 2,4,6		1/24/9/10:00	WW		
WWT 2,4,6.		1/24/9/1000			
7.7		:			
		·			
<u> </u>					
Sample Comments:				/	

Date

Time

10:37

LAB

Initials:

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

**REPORT ATTENTION** - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession.

**RECEIVED BY.** The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

#### PRICING AND CHARGES

Prices to be charged for work performed for CLIENT are those currently published in the Coffey Laboratories, Inc. (CLI) standard pricebook. CLIENT must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. All submissions of samples with testing requirements to CLI will be understood to be an agreement for services. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

#### **DELIVERY AND LIABILITY LIMITATIONS**

CLI will analyze samples provided by CLIENT as requested by CLIENT in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP). The maximum total liability assumed by CLI for work performed for CLIENT will in all cases be limited to the cost of the analysis. The specific format of the deliverable goods will be defined by CLIENT to CLI upon transfer of the samples to CLI. This warranty-supersedes all other warranties.

#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: January 31, 1996

Job Number: 960124I

PO Number: VERBAL-AMOS KAMERER

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 01/24/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
960124I-1	WWT 2,4,6	Waste Water	01/24/96	1000

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh

Technical Director

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FEB - 2 1996

KOPPERS INDS., INC. PORTLAND, OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452



#### **Analytical Data**

Koppers Industry

Job Number: 960124I

Page Number: 2 of 2

Lab Sample ID: 960124I-1

Field ID: WWT 2,4,6 Date/Time: 01/24/96 1000 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	<u>Analyst</u>
Oil & Grease	EPA 413.1	3.	ND	mg/L	01/24/96	AB
Total Phenols	EPA 420.1	0.05	0.05	mg/L	01/24/96	PDB

ND means none detected at or above the detection limit listed.



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Coffey Laboratories, Inc.

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1-25-96 WWT 135 6.4 KARC 64°

# Koppers002480

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: AMOS Bamere Company Name: Koppers Tradi Address: 7540 NwsTHe/e/	Inc	Project Name: Project Number:							Jeb Ni	mber:	Lope	9601	Page	of
Phone: (503) 286 3681 FAX: (503) 28523  Report Instructions:	10 831	Sanda  Standa  Priori  Rush	mple Turn	d. Fee) ee)	☐ FAX	(T-35)  pals (T-1  a Reportes Associated	157) Copy (T-14	102)	Card A Cash / Billing QC LI	Check: \$ Code:	1 2	3 4		<u>:</u>
Sample ID		Loc.	IĐ	Colle Date /	ction Time	Med	ia	)		Analysi	s Requested			Test/Profile
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ww1133			,	1/25/96	<i>3:30</i>								1	
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Sample Comments:									<del></del> .					
Sampled by: (Please Print)	Re	linquished	hv: (Please	Sign)	Da	ite	Time	1	/ :	Received by	v: (Sign)		Date	Time
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White Copy - Laboratory Copy Yellow Copy - Client Copy	(III)		4	7	100	96			VIVIN	7()			12596	)7 <i>U</i>
SHADED AREAS FOR LABORATORY USE ONLY	100	- 47/		·- · · · · · · · · · · · · · · · · · ·		· (E)		IAB (		(A)			117516	Thus

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

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**PROJECT NUMBER** - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

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**COLLECTION DATE** - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

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RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

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JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

#### PRICING AND CHARGES

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#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: January 31, 1996

Job Number: 960125AF

PO Number: Verbal-Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

RAK/atc

#### **Analytical Narrative**

The sample was received on 01/25/96 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory	,		Collection	Collection
Sample ID	Field Identification	Matrix	Date	Time
960125AF-1	WWT 1,3,5	Waste Water	01/25/96	1530

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh

Technical Director

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Coffey Laboratories, Inc.

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### **Analytical Data**

Koppers Industry

Job Number: 960125AF

Page Number: 2 of 2

Lab Sample ID: 960125AF-1

Field ID: WWT 1,3,5 Date/Time: 01/25/96 1530 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	6.	mg/L	01/25/96	AB
Total Phenols	EPA 420.1	0.05	ND	mg/L	01/26/96	PDB

ND means none detected at or above the detection limit listed.

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Coffey Laboratories, Inc.

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## Koppers Industries, Inc.

28 29 30

31

NPDES Monthly Stormwater Discharge Log

Day of	No	Sample	Sample	Discharging	Discharging	Emergency
Month	Discharge	Taken	Taken	1-3-5	2-4-6	Discharge
		Oil &	Phenolics			
		Grease	<u>_</u>			
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3						
4						·
5						
6						
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10	7/	1/				
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27	1,/		<u> </u>	<u> </u>	<u> </u>	†
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Month December Year 97

Month November	Year	97
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Day of Month	NO DISCHARGE	<u>Sampli</u> I -3 - 5	E <u>Taken</u> 2 - 4 - 6	<u>Disch</u> I - 3 - 5	<u>ARGING</u>   2-4-6	Emergency Discharge
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31						

	Month _	octoben	Year _	1997		
Day of		SAMPL	<u>e Taken</u>	Disch	arging	EMERGENCY
Month	No Discharge	I -3 - 5	2-4-6	1-3-5	2-4-6	Discharge
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<b>KOPPERS Industries</b>	: Inc

	Month _	SEPTEMBER	_ Year _	199	7	
Day of	· · · · · · · · · · · · · · · · · · ·	SAMPL	<u>e Taken</u>	Disch	ARGING	EMERGENCY
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	Month _	August	Year _	1997		
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KOPPE	ERS	Industi	ries.	Inc.

	Month _	July	Year	1997	<del></del>	
Day of Month	No Discharge	<u>Sampl</u> 1 -3 - 5	<u>E TAKEN</u> 2 - 4 - 6	<u>Discн</u> , 1 - 3 - 5	<u>ARGING</u> 2-4-6	Emergency Discharge
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KUDE	SOS	Industries	e Inc
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Month	JUNE	Year	1997	
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Day of Month	No Discharge	<u>Sampl</u> I -3 - 5	<u>E TAKEN</u> 2 - 4 - 6	<u>Disch</u> 1 - 3 - 5	<u>ARGING</u>   2-4-6	Emergency Discharge
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	Month _	Nay	Year _	97		
Day of Month	No Discharge	<u>SAMPL</u> 1 -3 - 5	E TAKEN 2 - 4 - 6	<u>Disch</u> I - 3 - 5	<u>ARGING</u> 2-4-6	Emergency Discharge
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	Month 2	APRIL	Year _	97		
Day of	· -	SAMPL	<u>e Taken</u>		<u>ARGING</u>	EMERGENCY
Month	No Discharge	I -3 - 5	2-4-6	1-3-5	2-4-6	Discharge
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-	Month _	March	Year _	97		
Day of Month	No Discharge	<u>SAMPL</u> 1 -3 - 5	E TAKEN 2 - 4 - 6	<u>Disch</u> 1 - 3 - 5	<u>ARGING</u> 2-4-6	Emergency Discharge
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Day of Month   No Discharge   1-3-5   2-4-6   1-3-5   2-4-6   Discharging   Discharge   Emergency   Discharge   1   1   1   1   1   1   1   1   1	•	Month /	Ebuar	✓ Year	97		
MONTH NO DISCHARGE 1-3-5 2-4-6 1-3-5 2-4-6 DISCHARGE	Day of				Disch	ARGING	EMERGENCY
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A: PERMITTEE NAME/ADDRESS (Include Facility Name: Location if Different) NAME Koppers Industries, Inc. ADDRESS 7540 NW St. Helens Rd Portland, OR 97210

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (INPULS)
DISCHARGE MONITORING REPORT (DMR)
(2-16)
101003
001

DISCHARGE NUMBER

3077-J 47430 Form Approved. OMB No. 2040-0004 Approval expires 05-31-9&

FACILITY NW Terminal LOCATION Multnomah Co.

MONITORING PERIOD YEAR MO DAY DAY YEAR MO FROM 97 TO 97 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PERMIT NUMBER

NOTE: Read instructions before completing this form.

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U.S.C.	§ 1319. (Penalties unde maximum imprisonment o	r these statutes may inci f between 6 months and 8	ude fines up to years.)	\$10,000 SIGNA	TURE OF PRINCIPAL ICER OR AUTHORIZE	EXECUTIVE A	REA NUMBE	R	YEAR N	10 DAY
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Koppers002496

#### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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# CERTIFICATE OF ANALYSIS

CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 12/22/97

PO#:

PROJECT NAME: WASTE WATER TANKS 2-4-6

CI SAMPLE#

CLIENTS IO#

971788-001-01

12/22/97 1530. Waste water Grab from Tanks 2-4-6

REPORT DATE: 12/23/97

REPORT NUMBER: 971788

PAGE: 1 OF 1

SAMPLE.

TEST

PARAMETER

RESULT

UNIT

ANALYS1

Waste water Grab from Tanks 2-4-6

971788-001-01 O&G, TOTAL, GRAV EPA 413.1/9070

TOTAL OIL & GREASE

DETECTION

LIMIT

Cordon L.

DRAFT REPORT - THIS REPORT HAS NOT UNDERGONE FINAL QUALITY ASSURANCE REVIEW.

12-23-97 WUTKS 2-4-6 PH 7.0 Temp 40°F

# Koppers002500

	ry • Inspection • Tank Calibration	CHA	IN OF C	USTODY	RE	COF	RD			tland			nat Da	في سوامي	OR 972	102	`	
	• Petroleum • OR Certified Water Testin	ng Date	12-	12	Page	/	of						•	•		5-7831		
Company Name: Attention: Address: 23 Phone: 50	Koppers Tuf III Ance Kanere, 40 Nw ST Helens, 17/and, Ox 972 3, 286 368   3, 285 283   J. Turner Submitt	Project Name Project Numb  Testing Prior  Normal  Rush	er:	on Method(s)  Telephone  FAX	01-CKTASE					lyses To				303) 2	37-1831			
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# CERTIFICATE OF ANALYSIS

CLIENT: KOPPERS INDUSTRIES, INC. 7540 NM ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 12/09/97

PO#:

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE#	CLIENTS 10#	DATE TIE	ME DESCRIPTION				,
971715-001-01 971/15-001-02		12/09/97 120 12/09/97 120	· · · · · ·				
REPORT DAT	TE: 12/11/97		REPORT NUM	BER: 971	715		PAGE: 1 OF 1
SAMPLE	TEST	PARAMETER		RESULT	UNIT	DETECTION LIMIT	ANALYSI
TANKS 2-4-6 W	ASTE WATER GRAB SA	MPLE			* *******		
9/1715-001-01	0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL	& GREASE	3.0	PPM	?	Gordon 1.
TANKS 2-4-6 N	ASIL WATER GRAB SA	Mbre	· ·				
9/1715-001-02	PIENOLS, TOTAL EPA 420.1	TOTAL REC	OVERABLE PHENOLICS	0.283	PPM	0.05	Λbigəil K.

DRAFT REPORT - DATA IN THIS REPORT MAY NOT BE COMPLETE. THIS REPORT INS NOT UNDERGONE FINAL QUALITY ASSIRANCE REVIEW.

Columbia Inspection, Inc. 7133 N Lombard St. - Portland, OR 97203 (503) 286-9464 Fax (503) 286-5355

12-12-97

WWTUS 2,46 6.8 PH 4105

# Columbia Inspection, Inc. Laboratory • Inspection • Tank Calibration

## **CHAIN OF CUSTODY RECORD**

#### Portland Office.

7133 North Lombard Street, Portland, OR 97203

Environmental ·	Petroleum • OR Certified Water Testing	Date 12- 9	7-97 P	age	of	<u> </u>	`-Ph	one: (5	03) 28	5-9464	FAX:	(503)	285-7	831		
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1 .	Kappens Ind INC	Project Name:		7												
Attention:	Mos Kanerer	Project Number:	<u> </u>	1	18											
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White Copy - Laboratory Yellow Copy - Client Copy

Koppers002503

CI Form 100 (COC) Rev A



# CERTIFICATE OF ANALYSIS

CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 12/16/97

PROJECT NAME: WWTKS 1-3-5

CI SAMPLE	# CLIENTS ID#	DATE TIME DESC	RIPTION			
971751-001	-01	12/16/97 1400 TAN	S 1-3-5 WASTE WATER GR	AB SAMPLE		
REPORT	DATE: 12/17/97	R	EPORT NUMBER: 97	1751		PAGE: 1 OF 1
SAMPLE	ANALYSIS	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
TANKS 1-3-	5 WASTE WATER GRAB S	MPLE				
971751-001	-01 0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREAS	SE ND	PPM	2	Gordon L.

REVIEWED BY

Martin Little - Laboratory Manager

12-17-97 WWThs 1-3-5 PA TI 447

#### Environmental • Petroleum • OR Certified Water Testing Date 12-16-97 Page Phone: (503) 286-9464 FAX: (503) 285-7831 Analyses To Be Performed Project Name: Project Number: Address: 1540 Na ST Veleus ad PORTLAND OR 97210 Testing Priority Notification Method(s) ☐ Normal ☐ Telephone Phone: (303) 286 3681 Rush ☐ FAX FAX: (505) 285 283/ Due Date ASAD Sampler: TJ-Turver D Submitted ☐ Mail Sample Sample Sample Sample id # Sample Description Matrix Date Time 12 16.97 1400 WNTKS 1-3-5 Date/Time Received By: FOR LABORATORY USE ONLY Method of payment 12.16-97 Inspection Sample Number: PO# 1430 ☐ Credit Laboratory Project Number: ☐ Cash/Check # Date/Time Relinquished By: Due Date: Amount Paid: \$ Columbia Inspection, Inc. Sample Disposition: Normal Special

CHAIN OF CUSTODY RECORD

Columbia Inspection, Inc.

Laboratory • Inspection • Tank Calibration

Portland Office

7133 North Lombard Street, Portland, OR 97203

Koppers002507

NAME Koppers Industries, Inc. ADDRESS 7540 NW St. Helens Road Portland, OR

FACILITY NW Terminal LOCATION Multnomah Co. DISCHARGE MONITORING REPORT (DMR)
(2-16)

101003 PERMIT NUMBER

001 DISCHARGE NUMBER

3077-J 47430

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MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM 01 TO 97 120-211 (22-23) 124-251 126-271 (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		3 Card Only) QUA (46-53)	NTITY OR LOADIN (54-61)	G	(4 Card Only) QU/ (38-45)	ANTITY OR CONCE (46-53)	NO. EX	FREQUENCY OF	SAMPL		
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
	SAMPLE MEASUREMENT	22,000		GPD					0	N/A	EST.
FLOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT				46	48	50	ø <sub>F</sub>	0	1/7	GRAB
TEMP	PERMIT REQUIREMENT				N/A	N/A	N/A	F			
	SAMPLE MEASUREMENT				6.8	6.8	6.9	:	0	1/7	GRAB
PH	PERMIT REQUIREMENT				6,0		9.0	SU			
	SAMPLE MEASUREMENT		**************************************		N.D.	1.6	2.7		0	1/7	GRAB
Oil & Grease	PERMIT REQUIREMENT				0	10	15	MG/L			
	SAMPLE MEASUREMENT		2.1		-07	.085	.1		0	1/30	GRAB
PHENOLS	PERMIT REQUIREMENT				0	.5	.7	MG/L		1/30	GIVID
	SAMPLE MEASUREMENT						•	888			
	PERMIT REQUIREMENT										
-	SAMPLE MEASUREMENT					:					
	PERMIT REQUIREMENT										
ME/TITLE PRINCIPAL EXECUT	IVE OFFICER I CERTIF	Y UNDER PENALTY OF L	AW THAT I HAVE PERSO	NALLY EXAMI EREIN: AND R	NED AND ASED ON			TELEPHON	1E	DA	TE
	MY INC	DURY OF THOSE IND NG THE INFORMATION	DIVIDUALS IMMEDIATE, I BELIEVE THE SUBMI PLETE. I AM AWAI SUBMITTING FALSE INFO MPRISONMENT. SEE 18	LY RESPONSI	BLE FOR )	Kamerer, I		J.			
R.D. Collins. VP TYPED OR PRINTED	U.S.C. 5	1319. (Penaloes under	MPRISONMENT, SEE 18 these statutes may inclubetween 6 months and 6	ide fines up to	\$10,000 ///SIGNA	TURE OF PRINCIPAL ICER OR AUTHORIZE	EVECUTA/E 50	03   286-		97 1 YEAR M	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

#### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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					MONTH	Aby.	YEAR 9	<b>,</b>								
					FLOW			DAYS OF								
	WWT-1	WWT-2	WWT-3	WWT-4	WWT-5	WWT-6	TOTAL	EMBAGEMY Amping	#DĀŸ	S IN	72	TAL	G.P.D.		<del> </del>	
GLS. PER TANK	45,000	45,000	45,000	45,000	20,000	20,000	OF TANKS	80,000/201	МΟ	N T H	K	211	DISCHARG	E		
# OF PUMPINGS	<del></del>	110	1//	///	111	///									· · · · · · · · · · · · · · · · · · ·	
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										mim	AVG	MAX		AVG.	MAX.	UNIT
TEMPERATURES PH	50 6,9	46	6.8			<del>                                     </del>	ļl			6.0		9.0	96	48	6.9	SU SU
OIL & GREASES	NO	2.7	2.0		<del>  </del>	<i>-</i>				0	10	15	6.8 N.O.	6.8	2.7	MG/L
PHENOLS	.1 ,07										.5	17	,07	,085	./	MG/L
	,				QUARTERI	Y PAH TES	TING						•		ļ	
		DATE CALL	DI E TAVEN		11/0											
		DATE SAM	PLE TAKEN		CV/		RESULTS_	S THAN 1000	)						<del> </del>	



# CERTIFICATE OF ANALYSIS

CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 11/26/97

PROJECT NAME: WASTE WATER ANALYSIS

CLIENTS ID# TIME DESCRIPTION

971651-001-01 11/26/97 1100 TANKS 1-3-5 WASTE WATER GRAB SAMPLE

REPORT DATE: 11/28/97 REPORT NUMBER: 971651 PAGE: 1 OF 1 DETECTION SAMPLE. TEST PARAMETER ANAI YST RESULT UNIT LINIT

TANKS 1-3-5 WASTE WATER GRAB SAMPLE

08G. TOTAL. GRAV TOTAL OIL & GREASE EPA 413.1/9070

Condon L.

Martin Little - Laboratory Manager

WWTK51-3.5 11.29-97 6.8 PH

# Koppers002511

# Columbia Inspection, Inc.

### **CHAIN OF CUSTODY RECORD**

### Portland Office

	•	Tank Calibration  R Certified Water T	esting	Date	11-26	-97	Page_		of	1			North L :: (503)						ļ	
Company Name: Attention: Address: 75 Phone: 505 FAX: 505	Koppe, Amos HO Nu Tland, 13,286:	es Ind I Kamepe Helens On 9721	nc.	Project Name: Project Number  Testing Priority  Normal  Rush  Due Date	Notificati	on Method(s)  Telephone  FAX	OI/-GRease						vses To							
Sample id #		mple Description	5	Sample Matrix	Sample Date	Sample Time	X												:	
																	<i>)</i>			
				*															· • ·	
Relinquished By:  Relinquished By:	een -	Date/Time  HOO  11/26-97  Date/Time	Received By  Received By  Columbia	Inspection.		Date/Time	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	iborat 7 ue Da	on Sa ory Pr te:	mple :	Vumb Vumb	er:	USE (	_   _   _ A	PC □ Cr	)#_ edit ish/C	'heck	#		



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 11/21/97

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE # CLIENTS ID#

DATE

TIME DESCRIPTION

971622-001-01

11/21/97 0700 TANKS 2-4-6 WASTE WATER CRAB SAMPLE

REPORT DATE: 11/25/97

REPORT NUMBER: 971622

PAGE: 1 OF 1

SAMPLE

TEST

PARAMETER

UNIT

DETECTION

LIMIT analyst

TANKS 2-4-6 WASTE WATER GRAB SAMPLE

O&G, TOTAL, GRAV EPA 413.1/9070

TOTAL OIL & GREASE

2.7

Gordon L.

REVIEWED BY:

Laboratory Manager

Columbia Inspection, Inc. 7133 N Lombard St. - Portland, OR 97203 (503) 286-9464 Fax (503) 286-5355

11/21/97 NW Ths 2-4-6 6,8 PH 465

### Environmental • Petroleum • OR Certified Water Testing Phone: (503) 286-9464 FAX: (503) 285-7831 Analyses To Be Performed Project Name: Project Number: Testing Priority Notification Method(s) ☐ Normal Telephone FAX: (503) 2852831 Rush ☐ FAX Sampler: June Submitted ☐ Mail Due Date Sample Sample Sample Sample id# Sample Description Matrix Date Time THS 2-4-6 6700 FOR LABORATORY USE ONLY Method of payment Inspection Sample Number: PO# ☐ Credit Cash/Check # \_\_\_ Laboratory Project Number Amount Paid: \$\_\_\_\_\_ Due Date: Sample Disposition: Normal Special

CHAIN OF CUSTODY RECORD

White Copy - Laboratory Yellow Copy - Client Copy

Koppers002514

Columbia Inspection, Inc.

Laboratory • Inspection • Tank Calibration

CI Form 100 (COC) Rev A

Portland Office

7133 North Lombard Street, Portland, OR 97203



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 11/12/97

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE # CLIENTS ID#

EPA 420.1

ATE TIME DESCRIPTION

971579-001-01

11/12/97 1100 W W TANKS 1-3-5

REPORT DATE: 11/18/97 REPORT NUMBER: 971579 PAGE: 1 OF 1 DETECTION SAMPLE PARAMETER RESULT UNIT LIMIT ANALYST W W TANKS 1-3-5 TOTAL PHENOLICS TOTAL PHENOLICS . 0.07 0.05 Dick R.

**REVIEWED BY** 

Martin Little - Laboratory Manager



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 11/10/97

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE#	CLIENTS ID#	DATE	TIME	DESCRIPTION
971567-001-01		11/10/97	1000	TANKS 1-3-5 WASTE WATER GRAB SAMPLE
071567-001-02		11/10/07	1000	TANKE 1 2 E WACTE WATER COAR CAMPLE

REPORT	DATE: 11/18/97	REPORT NUM	PAGE: 1 OF 1			
SAMPLE	TEST	PARAMETER	result	UNIT	DETECTION LIMIT	ANALYST
TANKS 1-3-	5 WASTE WATER GRAB SAMI	PLE				
	0&G. TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	ND	PPM	2	Gordon L.
	PHENOLS, TOTAL EPA 420.1	TOTAL RECOVERABLE PHENOLICS	<0.1	PPM	0.1	Dick R.

11-14-97. 6.9 PH 50°F WWThs 1-3-5

estemple (1996) en el principio de principio de principio de la principio de la companya de la companya de la c

Bankker with many.

# Columbia Inspection, Inc. Laboratory • Inspection • Tank Calibration Environmental • Petroleum • OR Certified Water Testing

<b>CHAIN</b>	<b>OF</b>	<b>CUSTOD</b>	Y	RECORI
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### **Portland Office**

7133 North Lombard Street, Portland, OR 97203 Phone: (503) 286-9464 FAX: (503) 285-7831

	Petroleum • OR	Certified Water T	esting	Date	1./2	<u> -97</u>	ege_	1	_ of	_					4 FAX:					
Company Name:  Attention:  Address:  Phone: 50	Kopper 40 1 1/ant 3 286	SING	TNC. ER Jens	Project Name: _ Project Number  Testing Priority  Normal  Rush	:Notificat	tion Method(s)  Telephone	age Menols		_ of						Yormed	(503)	285-78	331		
Sampler:	J/WX	ver Sub	omitted	Due Date	ISAP	☐ Mail														
Sample id#	Sar	mple Description		Sample Matrix	Sample Date	Sample Time														
	NWT	Ks 1-3-	5		11-12-9	7 1100	X			_		<u> </u>		_	-					
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Relinquished By:		Date/Time	Received By:	Puspection.	dei /	Pate/Time //2/5	<b>4</b> D1	ie Da	e:		omber		ai		☐ Ci Amour					_

Koppers002518

### CHAIN OF CUSTODY RECORD

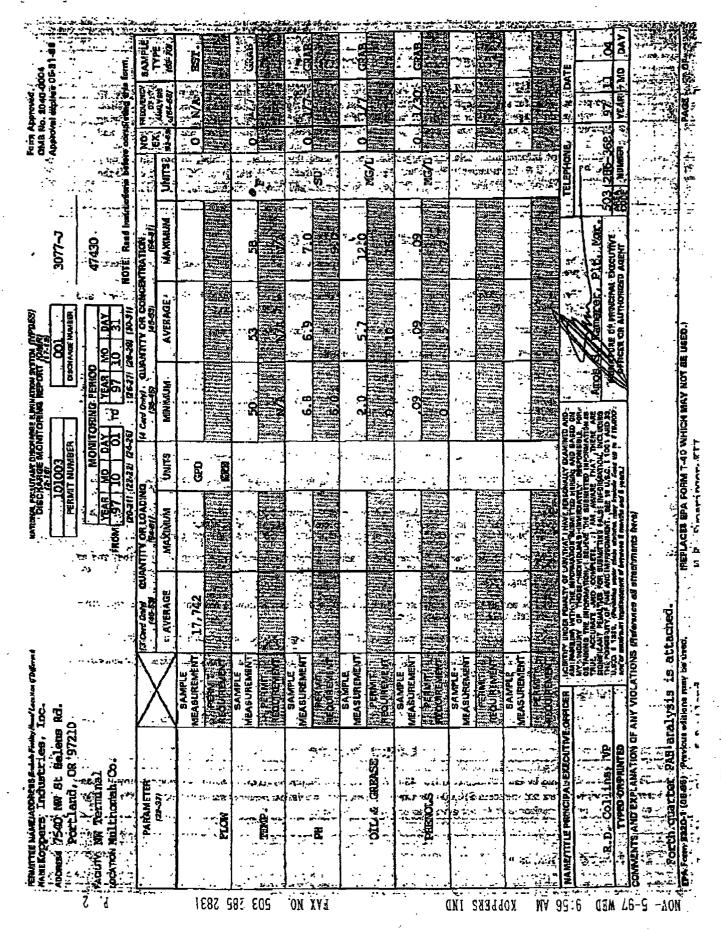
### **Portland Office**

Laboratory • Inspection • Tank Calibration 7133 North Lombard Street, Portland, OR 97203 Environmental • Petroleum • OR Certified Water Testing Phone: (503) 286-9464 FAX: (503) 285-7831 Analyses To Be Performed Project Name: Project Number: Testing Priority Notification Method(s) ☐ Telephone ☐ Normal ☐ FAX FAX: 15/03/2852831 Due Date ASAP Sample Sample Sample Matrix Sample id # Sample Description Date Time 11-10-97 1000 Received By: FOR LABORATORY USE ONLY Method of payment 11-10-97 Inspection Sample Number: PO# ☐ Credit ☐ Cash/Check # \_\_\_\_\_ Laboratory Project Number: Relinquished By: Due Date: Amount Paid: \$ Columbia Inspection. Inc. Sample Disposition. 

Normal 

Special \_\_\_\_

Columbia Inspection, Inc.



### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

					MONTH	Dotoben	YEAR /9/	7								
					FLOW			DAYS OF EMPLOY								
GLS. PER TANK	WWT-1 45,000	WWT-2 45,000	WWT-3 45,000	WWT-4 45,000	<u>WWT-5</u> 20,000	WWT-6	TOTAL	AMPING BO,000/DOT	#DAY	S IN	70 K	TAL	G.P.D. DISCHARG			
# OF PUMPINGS	7,7	70,000	40,000		77	†	1	0.,	<u> </u>				200111139			
GALS.PUMPED	90,000	135,000	90,000	135,000	90,00	60,000	550,000		ح	7	550	000	17,742			
					SAMPLE C	ONCENTRA	TION LEVE	s			MIT.	S [Max	AVN.	AVG.	MAX.	UNIT
TEMPERATURES	52 54	58 <u>51</u> 7.0 6.8	50 50	54 53									50	5.3	58	o E
PH OIL & GREASES	6.9 6.9 2.0 12.0	3.2	7,0 6.9	696.8						6,0	10	9,0	6.8 2,0	6.9 5.7	7.0	SU MG/L
PHENOLS	,09									0	.5	.7	,09	.09	,09	MG/L
					QUARTERL	Y PAH TES	TING									
		DATE SAM	PLE TAKEN	9 123	192		RESULTS_	14.6								
				Result	back		MUST BE LE	S THAN 1000	)						<u> </u>	

10/2/97



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 10/02/97

PO#:

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE # CLIENTS ID#	DATE T	TIME DESCRIPTION	•
971364-001-01	10/01/97 1	1500 WASTE WATER SAMPLE FROM TANKS 2-4-6	
971364-001-02	10/01/97 1	1500 WASTE WATER SAMPLE FROM TANKS 2-4-6	

REPORT DA	TE: 10/03/97	REPORT NUM	PAGE: 1 OF 1			
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
971364-001-01	0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	2.0	P₽M	2	Dick R.
971364-001-02	PHENOLS, TOTAL	TOTAL RECOVERABLE PHENOLICS	0.09	PPM	0.05	Dick R.

REVIEWED BY:

Richard D. Reid - Laboratory Director

10-1-97 WUTUS 2,4,6 PH T.A Tenys 58°F

10-6-97 ww. Ths 2/4/c PH 6.9

10/7/97 WWTK9246 6.9 PH 32°5

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Laborator Environmental •	y • Inspection • Petroleum • OF		Testing	Date	0-1	CUSTODY			ed of	<i>!</i>	7133 Pho	North I ne: (503)	omba 286-	ard Str 9464	FAX:				;	
Address: 73  Phone: 80  FAX: 80	40 Nu et far 246 5,285.		17210	Project Name: Project Number  Testing Priority  Normal  Rush  Due Date	Notific	ation Method(s)  Telephone FAX Mail	Menols	Oil-Grease										4 9	v	, s
Sample id#	Sa	mple Description	n.	Sample Matrix	Sample Date	Sample Time				1								et ?		
	wwi	Us 2.	4-5		10/19	7 1500	X	X												
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Relinquished By:	- Line	Date/Time  Date/Time	Received By:	IIII.	e f	Date/Time  Date/Time  10/2/9		aspectional de la constanta de	FOR LA	e Num t Num	ber:		ONL	-		O#_ redit ash/C	heck		nt.	

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CI Form 100 (COC) Rev A



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

DATE SUBMITTED: 10/17/97

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE #

CLIENTS ID#

DATE

TIME DESCRIPTION

971440-001-01

10/16/97 1600 WASTE WATER TANKS 2-4-6 GRAB SAMPLE

REPORT DATE: 10/21/97

REPORT NUMBER: 971440

PAGE: 1 OF 1

SAMPLE

TEST

PARAMETER

RESULT

UNIT

DETECTION LIMIT

PHONE: (503) 286-3681

FAX: (503) 285-2831

analyst

WASTE WATER TANKS 2-4-6 GRAB SAMPLE

O&G. TOTAL. GRAV EPA 413.1/9070

TOTAL OIL & GREASE 12

Dick R.

REVIEWED BY: Martin Little/- Laboratory Manager

10-23-97 WW MESTATE PM 6.9 10/22/97 norths 2.4:6 7.0 PH 10/21)97 2-46 MMTKS 5103

### Environmental • Petroleum • OR Certified Water Testing Phone: (503) 286-9464 FAX: (503) 285-7831 Analyses To Be Performed Company Name: Koppers Indituc Project Name: Project Number: Testing Priority Notification Method(s) ☐ Telephone ☐ Normal Rush ☐ FAX Due Date ASAP Sampler: Turker Submitted ☐ Mail Sample Sample Sample Sample id # Sample Description Matrix Date Time 10-16-97 Date/Time 10/17/47 FOR LABORATORY USE ONLY Method of payment Inspection Sample Number: PO# ☐ Credit ☐ Cash/Check # \_\_\_\_ Laboratory Project Number: Date/Time Received By: Amount Paid: \$\_\_\_\_ Due Date: Columbia Inspection, Inc. Sample Disposition: Normal Special CI Form 100 (COC) Rev A

CHAIN OF CUSTODY RECORD

Portland Office

7133 North Lombard Street, Portland, OR 97203

Columbia Inspection. Inc.

Laboratory • Inspection • Tank Calibration



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 10/29/97

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE #

CLIENTS ID#

DATE

TIME DESCRIPTION

971496-001-01

10/29/97 1400 WASTE WATER GRAB SAMPLE FROM TANKS 1-3-5

**REPORT DATE: 11/03/97** 

REPORT NUMBER: 971496

PAGE: 1 OF 1

SAMPLE

PARAMETER

DETECTION LIMIT

WASTE WATER GRAB SAMPLE FROM TANKS 1-3-5

O&G. TOTAL, GRAV EPA 413.1/9070

TOTAL OIL & GREASE

3.2

PPM

UNIT

Cordon L.

ANALYS1

- Laboratory Manager

Columbia Inspection, Inc. 7133 N Lombard St. - Portland, OR 97203 (503) 286-9464 Fax (503) 286-5355

10/31/97 PA 6:8 53°F

### Analyses To Be Performed Project Name: Project Number: Testing Priority Notification Method(s) ☐ Normal Telephone Rush ☐ FAX FAX: 503 2852831 Sampler: TT. Tuckel Submitted ☐ Mail Due Date Sample Sample Sample Sample id # Sample Description Matrix Date Time WWTK51-3-5 10-29-97 1400 Received By: FOR LABORATORY USE ONLY Method of payment 10-29-97 Inspection Sample Number: PO# ☐ Credit Laboratory Project Number: ☐ Cash/Check # \_\_\_\_ Relinquished By: Date/Time Amount Paid: \$ Due Date: Sample Disposition: Normal Special Columbia Inspection. Inc.

CHAIN OF CUSTODY RECORD

Columbia Inspection, Inc.

Environmental • Petroleum • OR Certified Water Testing

Laboratory • Inspection • Tank Calibration

Portland Office

7133 North Lombard Street, Portland, OR 97203

Phone: (503) 286-9464 FAX: (503) 285-7831



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 09/23/97

PO#:

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE #

CLIENTS ID#

DATE TIME DESCRIPTION

971315-001-01

09/23/97 1300 TANKS 1,3,5 WASTE WATER SAMPLE

report (	DATE: 10/02/97	REPORT N	PAGE: 1 OF			
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
971315-001-	-01 PNAH 2	acenaphthene	ND	PPM	0.0005	*.
	EPA 625 (SIM)	ACENAPHTHYLENE	ND	PPM	0.0005	
		anthracene	ND	PPM	0.0004	
•	•	BENZO(A)ANTHRACENE	0.0012	PPM	0.00001	
		BENZO(A)PYRENE	0.0025	PPM	0.00001	
		BENZO(B)FLUORANTHENE	0.0025	PPM	0.00004	
		BENZO(GHI)PERYLENE	0.0020	PPM	0.00002	
		BENZO(K)FLUORANTHENE	0.00087	PPM	0.00001	
		CHRYSENE	ND	PPM	0.0001	
		DIBENZO(AH)ANTHRACENE	0.00063	PPM	0.00002	
		FLUORANTHENE	0.0037	PPM	0.0002	
		FLUORENE	0.0012	PPM	0.0002	•
	r	INDENO(1,2,3-CD)PYRENE	ND	PPM	0.00002	
		Napthalene	ND	PPM	0.001	
		PHENANTHRENE	ND	PPM	0.0002	
		PYRENE	ND	PPM	0.0001	

SURROGATE

Acceptable Recovery

14,6

REVIEWED BY:

Richard D. Reid - Laboratory Director



Koppers002536

Columbia	Inspection,	Inc
Laboratory • Inst	ection • Tank Calibra	ation

### CHAIN OF CUSTODY RECORD

### Portland Office

	y • Inspection • Tank Calibration	Duta (2 . 2	2. <b>97</b> :	D	s /	7133 North 1					
	Petroleum • OR Certified Water Testing	Date <u>9-2</u>	<u> </u>	PageO	1	Phone: (503			285-783	! 	_==
Company Name:	MOS KAMERER	Project Name:				Analyses T	o Be Perfor	rmed	ТТ		
		Project Number:									ı
Address: 75		Testing Priority Not	fication Method(s)								
11 -	ettand On 97210	Normal	☐ Telephone								
Phone: <u>(5/2)</u>	3 2863681		,								
FAX: <u>50</u>	3 2887831	Rush	☐ FAX								
Sampler:	TTURNER D Submitted	Due Date	☐ Mail								
		Sample Sam	ple Sample								
Sample id #	Sample Description	Matrix Da	•   •								
	Walks 1-3-5	7/23	1971300	$\times$		-					
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Relinquished By:	Date/Time Received By:		Date/Time	E	OR LABORAT	ORY USE	ONLY	Meth	od of payr	ment	
Haja	9/24/97 0745			Inspection:	Sample Numb	ST:		PO#_			
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Relinquished By:	Date Lune Revelved by.	I West	Date/Time 4/9/	Due Date:					aid: S		
	Columbia	r Inspection, Inc.	1074		sition: 🗆 Normal			MICHIII FE	IK1, J		<del></del>

Koppers002537

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different) NAME Koppers Industries, Inc. ADDRESS 7540 NW ST Helens Road Portland, OR 97210

FACILITY NW Terminal LOCATION Multnomah Co. NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

101003 PERMIT NUMBER

001 DISCHARGE NUMBER 3077-J

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

MONITORING PERIOD YEAR MO DAY DAY FROM 97 09 97 30 (20-21) (22-23) (24-25) 126-271 (28-29) (30-31)

47430

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUI (46-53)								NO. FREQUENCY		
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	TYPE (69-70)	
·	SAMPLE MEASUREMENT	3667	·	GPD					0	N/A	EST	
FLOW	PERMIT REQUIREMENT											
:	SAMPLE MEASUREMENT				58	58	58	-	0	1/30	grab	
TEMP.	PERMIT REQUIREMENT				N/A	N/A	N/A	F'				
	SAMPLE MEASUREMENT	-			7.0	7.0	7.0		0	1/30	grab	
PH	PERMIT REQUIREMENT				6.0	-	9.0	SU				
	SAMPLE MEASUREMENT				3.7	3.7	3.7		0	1/30	grab	
OIL & GREASE	PERMIT REQUIREMENT				N/A	10	15 .	MG/L				
	SAMPLE MEASUREMENT				.10	.10	.10		0	1/30	grab	
PHENOLS	PERMIT REQUIREMENT			·	N/A	.5	.7	MG/L				
	SAMPLE MEASUREMENT	,					,					
	PERMIT REQUIREMENT									1/30 1/30 1/30 1/30 1/30	** 1	
	SAMPLE MEASUREMENT	1					:	-				
	PERMIT REQUIREMENT					1						
NAME/TITLE PRINCIPAL EXECUT	IVE OFFICER   CERTIF	FY UNDER PENALTY OF	LAW THAT I HAVE PERSO	NALLY EXAMI	NED AND	<i>\$</i>		TELEPHO	VE	DA	TE	
R.D. Collins, VP	MY IN OBTAIN TRUE, SIGNIFIC	QUIRY OF THOSE IN ING THE INFORMATION ACCURATE AND CON CANT PENALTIES FOR	DIVIDUALS IMMEDIATEI I, I BELIEVE THE SUBMI IPLETE. I AM AWAF SUBMITTING FALSE INFO	Y RESPONSI TTED INFORM RE THAT TH DRMATION, IN	BLE FOR ATION IS ERE ARE CLUDING	Kamerer, 1	5	03 , 286-	3681	97 1	0 10	
TYPED OR PRINTED OMMENTS AND EXPLANATION	U.S.C.	CERTIFY UNDER PENALTY OF LAW THAT! HAVE PERSONALLY EXAMINED AND M FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON Y INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR BTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS INC. ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE REPORTED IN THE AND COMPLETE. I AM AWARE THAT THERE ARE REPORTED IN THE AND INFORMATION, INCLUDING IE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 13101 AND 33 S.C. § 1319. (Persibes under these statutes may include fines up to \$10,000 OFFICER OR AUTHORIZED AGENT							R			

No PAH third quarter analysis, see the attached note.

cc: J. Holtrop-City of Portland



Koppers Industries, Inc. 7540 N.W. St. Helens Road Portland, OR 97210-3663

Amos S. Kamerer Plant Manager

Telephone: 503-286-3681 Fax: 503-285-2831

10/10/97

Note to File:

Confirming my telephone conversation with Elliot Zais on 10/01/97. Due to a laboratory equipment failure, the PAH analysis was not completed until 10/02/97, on a sample taken on 09/25/97. Consequently, the material represented by this sample was not discharged during September as planned, thus no PAH analysis is being reported for the 3rd quarter. The material sampled on 09/25/97 was discharged starting 10/06/97, thus PAH analysis will be reported as the 4th quarter results.

mos S. Kamerer

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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					MONTH	Sept.	YEAR 9	2								
					FLOW			DAYS OF Engagemy								
						WWT-6	TOTAL.	America	#DAY	S IN	70	TAL	G.P.D.			
GLS. PER TANK	45,000	45,000	45,000	45,000	20,000	20,000	OF TANK	80,000/200	M O	N_T_H	E	-11	DISCHARG	<u> </u>	ļ	<del></del>
# OF PUMPINGS		<del> ,</del>														
GALS.PUMPED		45,000		45,000		20,000	110,00		3	0	110	000	3667			
					SAMPLE C	ONCENTRA	TION LEVE	LS.		11	MIT.	٠. ٢				
TEL 1055 TUBES										mm	AVG.	MAX	MW.	AVG.	MAX.	UNIT
TEMPERATURES PH	58 7.0			<b> </b>						6.0		9,0			<del> </del>	SU
OIL & GREASES	3.7									0	10	15			<del> </del>	MG/L
PHENOLS	.10									Ø	.5	.7				MG/L
															ļ	
					QUARTERL	Y PAH TES	TING									
		DATE SAM	PLE TAKEN		1		RESULTS_									<del> </del>
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CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 09/18/97

P0#:

PROJECT NAME: WW Tks 2,4,6

CI SAMPLE #	CLIENTS ID#	DATE	TIME	DESCRIPTION
971287-001-01		09/18/97	1420	Wasstewater Grab from Tanks 2-4-6
971287-001-02		09/18/97	1420	Wasstewater Grab from Tanks 2-4-6

REPORT DATE: 09/22/97	REPORT NUME	BER: 9712	287		PAGE: 1 OF	1
SAMPLE TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST	
971287-001-01 0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	3.7	P₽M	2	Gordon L.	1
971287-001-02 PHENOLS, TOTAL EPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.10	PPM	0.05	Dick R.	

REVIEWED BY: (

Richard D. Reid - Laboratory Director

9-18-97 WWTKS 2-4-6 58°F 7.8° PH

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### Columbia Inspection, Inc.

### CHAIN OF CUSTODY RECORD

### Portland Office

Laboratory • Inspection • Tank Calibration 7133 North Lombard Street, Portland, OR 97203 Environmental • Petroleum • OR Certified Water Testing Date Phone: (503) 286-9464 FAX: (503) 285-7831 Analyses To Be Performed Project Name: Project Number: Testing Priority Notification Method(s) ☐ Normal ☐ Telephone Rush  $\Box$  FAX ☐ Mail Due Date Sample Sample Sample Date Matrix Time Sample id # Sample Description Relinquished By: FOR LABORATORY USE ONLY Method of payment Inspection Sample Number: PO# ☐ Credit Cash/Check # Laboratory Project Number: \_\_ Relinquished By: Date/Time Due Date: Amount Paid: \$ Columbia Inspection, Inc. 

White Copy - Laboratory Yellow Copy - Client Copy

Koppers002542

CI Form 100 (COC) Rev A

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) Koppers Industries, Inc. 7540 NW St. Helens Rd.

Portland, OR 97210

FACILITY NW: Terminal LOCATION Multnomah Co. NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

101003 PERMIT NUMBER

001 DISCHARGE NUMBER

3077-J

47430

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM 08 01 то 97 08 31 (20-21) (22-23) (24-25) 8 (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

	SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE	AVERAGE 3226	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM :	UNITS	EX (62-63)	ANALYSIS (64-68)	TYPE (69-70)
	MEASUREMENT PERMIT REQUIREMENT	3226									,
FLOW	REQUIREMENT			GDP			:		0	N/A	EST.
	SAMPLE										
N	MEASUREMENT	· .			60	60	<u>6</u> 0	o <sub>F</sub>	0	1/30	GRAB
TEMP.	PERMIT REQUIREMENT				N/A	N/A	N/A				
٨.	SAMPLE MEASUREMENT		,		7.2	7.2	7.2		0	1/30	GRAB
PH	PERMIT REQUIREMENT				6.0	-	9.0	SU .			
	SAMPLE MEASUREMENT		:		7.7	7.7	7.7		0	1/30	GRAB
OIL & GREASE	PERMIT REQUIREMENT				N/A	10	15	MG/L		1700	
N	SAMPLE MEASUREMENT	,			N.D.	N.D.	N.D.		0	1/30	GRAB
PHENOLS	PERMIT REQUIREMENT			,	N/A	.5	.7	MG/L		1/30 1/30	Signal
	SAMPLE MEASUREMENT					; • •	; `				A = 1
	PERMIT REQUIREMENT				- 2		-			·	ø,
N	SAMPLE MEASUREMENT				4	,				( ) B	
	PERMIT REQUIREMENT					<i>L</i> :					
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	MY IN OBTAIN TRUE, SIGNIFI	QUIRY OF THOSE II IING THE INFORMATIO ACCURATE AND CO CANT PENALTIES FOR	LAW THAT I HAVE PERS', NAMATION SUBMITTED IN NOIVIDUALS IMMEDIATE N, I BELIEVE THE SUBM MPLETE. I AM AWA SUBMITTING FALSE INF IMPRISONMENT. SEE IS	ELY RESPONSI	BLE FOR ATION IS IERE ARE	Kramerer,	Plt. Mgr.		p D		
R.D. Collins, VP TYPED OR PRINTED	THE PO U.S.C. and or n	SSIBILITY OF FINE AND § 1319. (Penelties und neximum imprisonment d	IMPRISONMENT. SEE 18 or these statutes may include the search of between 6 months and 8	B U.S.C.   100 lude fines up to 5 years.)	1 AND 33 STORAT	URE OF PRINCIPAL E			_	97 OS	

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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					MONTH	Avg	YEAR /9	97								
					FLOW			DAYS OF EMALORMY								
GLS. PER TANK	<u>WWT-1</u> 45,000	WWT-2 45,000	45,000	WWT-4 45,000		WWT-6 20,000	OF TANKS	80,000/AN	#DAY M_O	S IN N.T.H	10		G.P.D. DISCHARG	E		
# OF PUMPINGS GALS.PUMPED	45,000		45,000		20,000		3	110,000	- 3				3226			
					SAMPLE C	ONCENTRA	TION LEVE	S			MIT.	S	Min.	AVG.	MAX.	UNIT
TEMPERATURES PH	7,2									6.0		9,0	40	60	60	P F SU
OIL & GREASES PHENOLS	7.7 NO									0	10	15	7.7 NA	7.7 NO	7.7 NO	MG/L MG/L
					QUARTERI	Y PAH TES	TING									
		DATE SAM	PLE TAKEN		<u> </u>		RESULTS_									



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PO#:

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 08/28/97

PROJECT NAME: WWTks 1.3.5

CI SAMPLE # DATE CLIENTS ID# TIME DESCRIPTION

971166-001-01 WW 1.3.5 08/28/97 1105 WWTks 1,3,5 Wastewater Grab

971166-001-02 WW 1.3.5 08/28/97 1105 WWTks 1,3,5 Wastewater Grab

REPORT DATE: 08/29/97 REPORT NUMBER: 971166 PAGE: 1 OF 1 DETECTION SAMPLE TEST **PARAMETER** RESULT UNIT LIMIT ANALYST 971166-001-01 0&G, TOTAL, GRAV TOTAL OIL & GREASE 7.7 PPM Gordon L. EPA 413.1/9070 971166-001-02 TOTAL PHENOLICS TOTAL PHENOLICS ND PPM Dick R. 0.05 EPA 420.1

REVIEWED BY:

8-28-97 WWTK5 1-3-5 7,2PH 60°F

# Columbia Inspection, Inc. Laboratory • Inspection • Tank Calibration vironmental • Petroleum • OR Certified Water Tes

### **CHAIN OF CUSTODY RECORD**

### Portland Office

Laborator	ry • Inspection •	Tank Calibration										7133	North L	ombar	d Stre	et, Porti	and, C	R 9720	3	
Environmental	• Petroleum • OF	Certified Water T	esting	Date			Page_		_ of _		<del>-</del>	Phone	: (503)	286-9	464 F	AX: (5	03) 28	5-7831		
Address:Phone: (	1. F. Mar			Project Name: Project Number  Testing Priority  Normal  Rush  Due Date	r:	tion Method(s)  Telephone  FAX	He Manle	1 Haceso				Analy	vses To	Be P	erfor	ned				
Sample id #		mple Description		Sample Matrix	Sample Date	Time	1	100	)    									7.7		
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White Copy - Laboratory Yellow Copy - Client Copy

Koppers002547

CI Form 100 (COC) Rev A

Koppers002548

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KOPPERS INDUSTRIES, INC.
ADDRESS 7540 NW ST. HELENS RD.
PORTLAND, OR 97210

FACILITY NW TERMINAL LOCATION MULTNOMAH CO.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

101003 PERMIT NUMBER

001
DISCHARGE NUMBER

3077-Ј

47430

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

FROM 97 07 01 TO 97 07 31 (20-21) (22-23) (24-25) (26-27) (26-27) (26-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QU (46-53)	ANTITY OR LOADIN (54-61)	1G	(4 Card Only) QU/ (38-45)	ANTITY OR CONC (46-53)	ENTRATION (54-61)		NO. EX	FREQUENCY OF	SAMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
	SAMPLE MEASUREMENT	7097		GPD					0	N/A	EST.
FLOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT		,		56	57	58	o <sub>F</sub>	0	2/30	GRAB.
TEMP.	PÉRMIT REQUIREMENT				N/A	N/A	N/A				
	SAMPLE MEASUREMENT				6.9	6.95	7.0	SU	0	2/30	GRAB.
РН	PERMIT REQUIREMENT				6.0		9.0				
	SAMPLE MEASUREMENT	'			2.0	2.0	2.0	MG/L	0	2/30	GRAB.
OIL & GREASE	PERMIT REQUIREMENT				N/A	10	15				
-	. SAMPLE MEASUREMENT				.07	.085	.10	MG/L	0	2/30	GRAB.
PHENOLS	PERMIT REQUIREMENT				N/A	.5	.7				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT								10000000	,	
	PERMIT REQUIREMENT					a					
AME/TITLE PRINCIPAL EXECUTIV	E OFFICER   CERTI	FY UNDER PENALTY OF	LAW THAT I HAVE PERS	ONALLY EXAMI	INED AND		· · · · · · · · · · · · · · · · · · ·	TELEPHO	VE	D/	ATE
. D. COLLINS, VP	MY IN OBTAIN TRUE, SIGNIFI	QUIRY OF THOSE IN ING THE INFORMATION ACCURATE AND CO-	LAW THAT I HAVE PERS RMATION SUBMITTED H DIVIDUALS IMMEDIATE N, I BELIEVE THE SUBM MPLETE. I AM AWA SUBMITTING FALSE INF IMPRISONMENT. SEE 18	LY RESPONSI	BLE FOR ATION IS ERE ARE ICLUDING	Kamerer,	Plt. Mgr.	3   286-	3601	97 0	8 08
TYPED OR PRINTED	and or n	naximum imprisonment d	f between 6 months and 6	ude fines up to	\$10,000 SIGNA	TURE OF PRINCIPAL FICER OR AUTHORIZI		REA NUMBE			0 DAY

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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					MONTH	Tuly	YEAR 9						and a second of the second of			-
					FLOW			DAYS OF ENRICEMY								
	WWT-1	WWT-2			WWT-5	WWT-6	TOTAL	ALMAINS	#DAY	S IN	70	TAL	G.P.D.			1
GLS. PER TANK	45,000	45,000	45,000	45,000	20,000	20,000	OF TANKS	80,000/Am	M O I	HTI	B		DISCHARG	E	ļ	Ţ
# OF PUMPINGS	}	<del></del>	<del>,</del> -		·/	- <del></del>	6	0		· · · · · · · · · · · · · · · · · · ·					<del> </del>	
GALS.PUMPED				ļ			220,000	0,	3,				2097			
					SAMPLE C	ONCENTRA	TION LEVE	S			MIT.					
	eriti erit		ļ							min	Ayo.	MAX		AVG.	MAX.	UNIT
TEMPERATURES PH	58 56 6.9 7.0	<i>-</i>		<b> </b>	ļ			[		7.	ļ	0.0	56	57	58	SU
OIL & GREASES	20 2.0		}				<del></del>	<del>  </del>		6.0	10	9,0	6,9	2.0	2.0	MG/L
PHENOLS	,07 ,10									_	1.5	17	2.0	109	110	MG/L
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		DATE SAM	PLE TAKEN	<u> </u>			RESULTS_				<del> </del>		<del> </del>	<del></del>	<del> </del>	<del> </del>
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CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 06/30/97

PO#:

PROJECT NAME: WW Tks 1,3,5 AND 2,4,6

CI SAMPLE#	CLIENTS ID#	DATE	TIME	DESCRIPTION
970895-001-01	1,3,5	06/30/97	1145	WW Tks 1,3,5
970895-001-02	1,3,5	06/30/97	1145	WW Tks 1,3,5
970895-002-01	2,4,6	06/30/97	1145	WW Tks 2,4,6
970895-002-02	2,4,6	06/30/97	1145	WW Tks 2,4,6

REPORT D	ATE: 07/01/97	REPORT NUM	IBER: 970	0895		PAGE: 1 OF 1
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
WW Tks 1,3,	5 01 0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	2	PPM	2	Gordon L.
970895-001-	02 PHENOLS, TOTAL EPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.07	PPM	0.05	Dick R.
WW Tks 2.4, 970895-002-	6 01 0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	2	PPM	2	Gordon L.
970895-002-	02 PHENOLS, TOTAL FPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.10	PPM	0.05	Dick R.

ORIGINAL

REVIEWED BY:

Richard D. Reid - Laboratory Director

Columbia Inspection, Inc. 7133 N Lombard St. - Portland, OR 97203 (503) 286-9464 Fax (503) 286-5355

6/30/91 WWTKS 2,4,6 560F 7.0 PH

and of the same of the first are the same of the same of the same of the same of the same of the same of the s The same of the 5/30/97 WWTK31-3-5 580F 6.9 PH

### Date Sample id# Sample Description Matrix Time Koppers002553 Relinquished By: Received By: FOR LABORATORY USE ONLY Method of payment Inspection Sample Number: PO# ☐ Credit ☐ Cash/Check # Laboratory Project Number: \_\_\_ Date/Time Due Date: Amount Paid: \$ Columbia Inspection, Inc. Sample Disposition: Normal Special White Copy - Laboratory Yellow Copy - Client Copy CI Form 100 (COC) Rev A

CHAIN OF CUSTODY RECORD

Notification Method(s)

☐ Telephone

Sample

☐ FAX

Sample

Project Name: \_\_ Project Number:

Testing Priority

Due Date A 5/

Sample

☐ Normal,

Submitted

Portland Office

Analyses To Be Performed

7133 North Lombard Street, Portland, OR 97203

Phone: (503) 286-9464 FAX: (503) 285-7831

Columbia Inspection, Inc.

Environmental • Petroleum • OR Certified Water Testing

Laboratory • Inspection • Tank Calibration

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME

KOPPERS INDUSTRIES, INC.

**ADDRESS** 

7540 NW ST. HELENS RD.

PORTLAND, OR 97210

FACILITY LOCATION NW TERMINAL MULTNOMAH CO.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

101003 PERMIT NUMBER

OO1
DISCHARGE NUMBER

3077**–**J

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

FROM 97 06 01 TO 97 06 30 (20-21) (22-23) (24-25) (26-27) (26-27) (28-29) (30-31)

47430

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUA (46-53)	NTITY OR LOADIN (54-61)	G	(4 Card Only) QUA (38-45)	NTITY OR CONCEN (46-53)	ITRATION (54-61)		NO. EX	FREQUENCY OF	SAMPLE TYPE
102-077		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
	SAMPLE MEASUREMENT	3667		GPD			,		N/A	1/30	EST.
FLOW	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT				64	64	64	o <sub>F</sub>	0	1/30	GRAB
TEMP.	PERMIT REQUIREMENT				N/A	N/A	N/A				
PH	SAMPLE MEASUREMENT	<u> </u>	2000		7.1	7.1	7.1	SU	0	1/30	GRAB
Pn	PERMIT REQUIREMENT				6.0	N/A	9.0				
OIL & GREASE	SAMPLE MEASUREMENT				8.5	8.5	8.5	MG/L	0	1/30	GRAB
OIL & GREADE	PERMIT REQUIREMENT				N/A	10	15				
PHENOLS	SAMPLE MEASUREMENT				.24	.24	.24	MG/L	0	1/30	GRAB
FILENOES	PERMIT REQUIREMENT				N/A	.5	.7				
	SAMPLE MEASUREMENT				·						
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT						*************************				
·	PERMIT REQUIREMENT					A	-				
NAME/TITLE PRINCIPAL EXECUT	IVE OFFICER   CERTIF	TY UNDER PENALTY OF	LAW THAT I HAVE PERSO	NALLY EXAMI	NED AND ASED ON			TELEPHO	VE_	DA	ATE
R.D. COLLINS, VP	MY INI OBTAIN TRUE, SIGNIFIC	QUIRY OF THOSE IN ING THE INFORMATION ACCURATE AND CON CANT PENALTIES FOR	AW THAT I HAVE PERSON AMATION SUBMITTED HOIVIDUALS IMMEDIATEI, I BELIEVE THE SUBMITION FOR THE SUBMITTING FALSE INFO MPRISONMENT. SEE 18 These statutes may include the tween 6 months and 6	Y RESPONSI TTED INFORM RE THAT TH DRMATION, IN	BLE FOR ATION IS ERE ARE ATRO	. Kamerer, P	<del> </del> 50	03 , 286–	3681	97 0	7 07
TYPED OR PRINTED	U.S.C.	1319. (Penelties under neximum imprisonment of	these statutes may inclu- between 6 months and 6	ide fines up to years.)	\$10,000 SIONA	TURE OF PRINCIPAL E ICER OR AUTHORIZED	AGENT A	REA NUMBE	R	YEAR N	10 DAY

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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					MONTH	Pune_	YEAR 19	27								
					FLOW			DAYS OF EMALESMY								
	WWT-1	WWT-2	WWT-3	WWT-4	WWT-5	WWT-6	TOTAL	Amains	#DAY	S IN	70	TAL	G.P.D.			
GLS. PER TANK	45,000	45,000	45,000	45,000		20,000	OF TANK	80,000/000	M O	NTH	K	211	DISCHARG	E	ļ	
# OF PUMPINGS			<del></del> -				3									<del></del>
GALS.PUMPED	45,000		45,000		20,000		110,000		3	0	1/0	,000	3,667			
	,				SAMPLE C	ONCENTRA	TION LEVE	LS		11	NI 1	25				<del> </del>
												MAX		AVG.	MAX.	UNIT
FEMPERATURES PH	64									-			64	64	164	® F SU
OIL & GREASES	7.1									6,0	10	9,0	8.5	7.1	185	MG/L
PHENOLS	,24									0	.5	.7	,24	,24	121	MG/L
					QUARTERI	Y PAH TES	TING								ļ	
				<del></del>	360131717	U CALLINA	111175						i		<del></del>	
		DATE SAM	LE TAKEN				RESULTS_									1
							(MUST BE LE	S THAN 1000	)							



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 06/03/97

PO#:

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE #	CLIENTS ID#	DATE	TIME	DESCRIPTION
970774-001-01		06/03/97	1500	WASTE WATER FROM TANKS 1, 3,& 5
970774-001-02		06/03/97	1500	WASTE WATER FROM TANKS 1, 3,& 5

REPORT D	ATE: 06/05/97	REP	ORT NUM	BER: 970	)774		PAGE: 1 OF 1
SAMPLE	TEST	PARAMETER		RESULT	UNIT	DETECTION LIMIT	ANALYST
WASTEWATER	FROM TANKS 1,3,5	,	:				
970774-001-	01 O&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	•	8.5	PPM	2	Gordon L.
970774-001-	02 PHENOLS, TOTAL FPA 420.1	TOTAL RECOVERABLE PI	HENOLICS	0.24	PPM	0.05	Dick R.

6/3/99 wwtks 1,3,5 64°F 7.1 Ph

•		bection, Inc	e.	CHAI	IN OF C	CUSTODY	Y RI	<b>ECO</b>	RD				Off			,				
	-	<ul> <li>Tank Calibration</li> <li>R Certified Water T</li> </ul>	Γesting	Date	<u> </u>	97	Page	1	of	1		-			reet, Po FAX:					
Company Name:	Koppe la	ers Ind	Tre.	Project Name:	-		, ,	1			Anal	yses T	o Be I	Perfor	rmed					
Address: 73	140 Mu	v 51 Hele Or 972	NSKE	Testing Priority  Normal	/ Notificat	tion Method(s)	Me	2116												
FAX: <u>603</u>	3, 285.	,	bmitted	Rush Due Date		☐ FAX	rols.	CRUSE										ge start	***	
Sample id #	Sı	ample Description		Sample Matrix	Sample Date	Sample Time	]	10												
-	wwi	TK5 1.3	5		4/3/9	7 1500														
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												$\prod$	$\prod_{i}$							
Relinquished By:	luner	Date/Time 6/3/97	Received By:	_		Date/Time	Ir	ıspecti		CLAB mple l		USE	ONL	_		0#_		payme	ni	
Relinquished By:		Date/Time	Received By	a Puspection,	si/	Date/Tifue   7   7   1540	D	ne Da	ite:	roject l		ecial_			☐ C Amou	ash/C	Check	#		

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Koppers002558

CI Form 100 (COC) Rev A

Kop	
oppers002559	

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different) NAME KOPPERS INDUSTR ADDRESS 7540 NW ST. HEL PORTLAND, OR 97	ENS RD	· — — — — — — — — — — — — — — — — — — —		ARGE MON (2-16)	NITORING REF	ON SYSTEM (NPDES PORT (DMR) (17-19) OOI DISCHARGE NUMBER	3077–J 47430	Form Approved	-0004	
FACILITY NW TERMINAL LOCATION MULTNOMAH CO.			FROM 97	MONIT MO DA 05 01	ORING PER			Approval expir		
PARAMETER		(3 Card Only) QU (46-53)	(20-21) ANTITY OR LOADIN (54-61)	(22-23) (24-2 IG	25) (26-27) (4 Card Only) (38-45)	<u> </u>	NOTE: Read instru CONCENTRATION (54-61)		NO. FREQUENC OF EX ANALYSIS	<del></del>
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	LIMITE	(64-68)	(69-70)
FLOW	SAMPLE MEASUREMENT	10645		GPD					N/A 9/31	EST.
	PERMIT . REQUIREMENT							191	100	
TEMP.	SAMPLE MEASUREMENT				61	62	62	o <sub>F</sub>	0 9/31	GRAB
	PERMIT REQUIREMENT		2.30		N/A	N/A	N/A	# 4 P		
PH	SAMPLE MEASUREMENT				6.8	6.8	6.9	SU (	0 9/31	GRAB
	PERMIT REQUIREMENT				6.0	N/A	9.0			
	SAMPLE MEASUREMENT				N.D.	4.0	9.8	MG/L	0 9/31	GRAB
OIL & GREASE	PERMIT REQUIREMENT				N/A	10	15 '			
·	SAMPLE MEASUREMENT				N.D.	.05	.08	MG/L	0 9/31	GRAB
PHENOLS	PERMIT REQUIREMENT			:	N/A	.5	.7			
	SAMPLE MEASUREMENT				:			# #		
	PERMIT REQUIREMENT		2	<i>i</i>						
	SAMPLE MEASUREMENT	:			:			9 1		
	PERMIT REQUIREMENT					/		aand C		
AME/TITLE PRINCIPAL EXECUTIVE	OFFICER   CERTIF		F LAW THAT I HAVE P			T		TELEPHONE		ATE
R.D. COLLINS, VP	ON MY OBTAINII TRUE, SIGNIFIC THE PO	INQUIRY OF THOSE NG THE INFORMATION ACCURATE AND COI ANT PENALTIES FOR SSIBILITY OF FINE AN	INFORMATION SUBMITTE. INDIVIDUALS IMMEDIATE.  ! BELIEVE THE SUBMI MPLETE. I AM AWARE SUBMITTING FALSE INF D IMPRISONMENT. SEE	LY RESPONSIBI ITTED INFORMA E THAT THER FORMATION, INC 18 U.S.C. § 100	ATION IS ARE CLUDING OI AND	S. Kamerer		03   286-36	81 97 C	06 09
TYPED OR PRINTED	33 U.S.	C. § 1319. (Penalties	under these statutes ma ment of between 6 months	ay include fine:	s up to	FICER OR AUTHO				MO DAY
OMMENT AND EXPLANATION OF AN				resu	ults are a	ttached	, 00			<u>.</u>

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

PAGE 0



### **Analytical Data**

Koppers Industry

Job Number: 970509Y

Page Number: 2 of 2

Lab Sample ID: 970509Y-1

Field ID: WWTKS 1,3,5 Date/Time: 05/05/97 0900 Matrix: Waste Water RECEIVED

MAY 22 1997

KOPPERSINDS, INC. PORTLAND, OR

EPA Category: Extractable Organics

Analysis Performed: EPA 8310; Polynuclear Aromatic Hydrocarbons by HPLC.

Analysis Date: 05/12/97 Analyst: VB

	Detection	Laboratory	Analytical
Parameter	Limit	<u>Blank</u>	Result
Acenaphthene	50.	ND	ND
Acenaphthylene	50.	ND	ND .
Anthracene	5.	ND	ND
Benzo(a)anthracene	0.5	ND	3 <b>.4</b>
Benzo(a)pyrene	2.	ND	5.
Benzo(b)fluoranthene	0.5	ND	7.6
Benzo(g,h,i)perylene	2.	ND	8.
Benzo(k)fluoranthene	0.5	ND	2.5
Chrysene	5.	ND	ND
Dibenzo(a,h)anthracene	2.	ND	ND
Fluoranthene	5.	ND	10
Fluorene	25.	ND	ND
Indeno(1,2,3-cd)pyrene	2.5	ND	ND
Naphthalene	25.	ND	ND
Phenanthrene	25.	ND	ND
Pyrene	5.	ND	9.

Results expressed as  $\mu g/l$  unless otherwise noted.

ND means none detected at or above the detection limit listed.

45.5 Ug/L



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 05/08/97

PO#:

PROJECT NAME: QUARTERLY PAH ANALYSIS

CI SAMPLE #

CLIENTS ID#

DATE

TIME DESCRIPTION

970654-001-01

05/05/97 0930 WASTE WATER GRAB SAMPLE FROM WWTKS 1,3,& 5

REPORT	DATE: 05/12/97	REPORT		PAGE: 1 OF 1		
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
WASTE WATE	R GRAB SAMPLE FROM WWTK	\$ 1.3,& 5				
	PNAH 1 EPA 8270M (SIM)	acenaphthene acenaphthylene	0.0084 0.00026	PPM PPM	0.00005 0.00005	Jacob F.
		ANTHRACENE BENZO(A)ANTHRACENE	0.0019 0.0076	PPM PPM	0.00005 0.00005	
	_115	BENZO(A) PYRENE BENZO(B) FLUORANTHENE	0.0031 0.0077	PPM PPM	0.0005 0.0005	
A	ECEIVE	BENZO(GHI)PERYLENE BENZO(K)FLUORANTHENE	0.0042 0.0077	PPM PPM	0.0005	
	41.3 m /	CHRYSENE DIBENZO(AH)ANTHRACENE	0.0076 <0.0005 0.012	PPM PPM PPM	0.00005 0.0005 0.00005	
	KOPPERS INDS. IN PORTLAND, OF	FLUORENE INDENO(1.2.3-CD)PYRENE	0.0058 0.0025	PPM PPM	0.00005 0.0005	·
	CORIDO.	NAPTHALENE PHENANTHRENE	0.00035 0.0040	PPM PPM	0.00005 0.00005	
		PYRENE	0.011	PPM	0.00005	
•		SURROGATE	OBSCURED 84.61 2	RECOVERY	50%-150%	

Laboratory Manager

### Sample Sample Sample Sample id # Sample Description Matrix Date Time Koppers002562 Received By: **FOR LABO** Inspection Sample No Laboratory Project Ni Date/Time Relinquished By: Due Date:\_\_\_\_ Sample Disposition: II N

Project Name: \_\_ Project Number:

Testing Priority

Due Date ASAP

☐ Normal

Submitted

**CHAIN OF CUSTODY RECORD** 

Notification Method(s)

Telephone

☐ FAX

☐ Mail

### Portland Office 7133 North Lombard Street, Portland, OR 97203

	Pho	one: (	503) 2	86-9	464	FAX:	(503)	285-7	831		
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Columbia Inspection, Inc.

Laboratory • Inspection • Tank Calibration

Sampler:

Environmental • Petroleum • OR Certified Water Testing

# Koppers002563

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

CENTRAL OREGON BRANCH 827 SW 7th Redmond, OR 97756

CORPORATE HEADQUARTERS 12423 NE Whitaker Way Portland, OR 97230

EASTERN OREGON BRANCH 419 SW 5th Pendleton, OR 97801

PHONE/FAX (541) 548-0972	_	(503) 254	<del>i</del> -179	4 FAX: (5	03) 254-145	2		PHONE/FAX (541) 276-0385		
Report Attention: AMOS KAMERER  Company Koppers Ind Iwo,  Mailing Address:  Mailing	PO Number: Project Number: Project Name: EPA Protocol Containers: Y/N Other:  Sample Turnaround Reporting Request State Compliance Format FAX Results - Preliminary  Rush (Additional Fee) FAX Results-Final Verbals Results Emergency (Additional Fee) Extra Report Copy Initials:  Fees Associated)						FOR LABORATORY USE ONLY Page of Job Number:			
Sample ID	Loc.	ID	#	Date	ection / Time	Media		Analysis Requested		Test/ Profile
WWTK3.1,3,5				5/5/97	0900			PAH		
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t		<b> </b>								
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Sampled By: / U TURNER	_L		<u> </u>	AUTHORIZI	ED CUSTOMER	SIGNATURE	<u> </u>	DATE:		
						<u> </u>				
Sample Comments		hetby: (Pla		n) ·	)   Date	<u></u>	-	Received by: (Sign)	Date	Time
							LAB	mark W. Jan 1	5-9-97	53

White Copy-Laboratory Yellow Copy - Customer

COMPLETE THIS FORM PER INSTRUCTIONS ON REVERSE SIDE

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY ENSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION - Name of the person who receives the laboratory report.

CUSTOMER NAME - Name of the company or individual requesting the analysis.

MAILING ADDRESS - Address of the customer to which the laboratory report and billings should be sent.

REPORT INSTRUCTIONS - A brief description of any special mail or transmittal instruction or address information pertaining to extra report

copies.

PROJECT NAME - Applies to customer project name.

PROJECT NUMBER - Applies only to samples submitted by the customer for its internal identification purposes.

REPORTING REQUEST

STATE COMPLIANCE - Applies to report format. MUST BE CHECKED FOR ALL COMPLIANCE WORK REQUESTED

SAMPLE ID - A short description of the sample point and material to be analyzed (e.g., "Effluent from sand filter"). This

description will appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle or container.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the date/time the

sample left his/her possession, etc.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and time should be

same as "Relinquished by" unless the sample(s) was shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

**AUTHORIZED CUSTOMER** 

SIGNATURE - Form must be signed by authorized tepresentative of customer.

#### TERMS AND CONDITIONS

#### PRICING AND CHARGES

Prices to be charged for work performed for CUSTOMER are those currently published in the COFFEY Laboratories, Inc. (CLI) standard pricebook unless otherwise agreed in writing by the CUSTOMER and CLI. CUSTOMER must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

#### DELIVERY AND LIABILITY LIMITATIONS

The specific format of the goods will be defined by CUSTOMER to CLI upon delivery of the sample(s) to CLI. CLI will analyze samples provided by CUSTOMER as requested by CUSTOMER in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP).

#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CUSTOMER as proprietary and confidential. No CUSTOMER information will be released to third persons without the written request of the CUSTOMER.

#### LIMITATION OF LIABILITY AND WARRANTY

CLI gives no warranty, express or implied, or of fitness for a particular purpose, in connection with its analytical testing or reporting. Any liability of CLI to CUSTOMER or any third party shall be limited to the cost of analysis charged to CUSTOMER.

#### PAST DUE ACCOUNTS

CUSTOMER agrees to pay 11/2 % per month on all sums past due until paid in full as a service charge and all of CLI's collection costs, including reasonable attorney fees.

#### EXPERT TESTIMONY AND COURT APPEARANCES

In the event CUSTOMER requires the further written opinion or testimony of any employee of CLI, including response to a subpoena issued by CUSTOMER or any third person. CUSTOMER agrees to pay such additional fees and expenses as may be reasonably assessed by CLI.

#### ALTERNATIVE DISPUTE RESOLUTION (ADR)

Any disputes arising out of this Agreement or the analytical testing of reporting of CLI shall be settled through mediation and/or arbitration rather than litigation, and the cost of the ADR shall be borne equally by both parties.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CUSTOMER will be construed and interpreted in accordance with the laws for the state of Oregon.



### RECEIVED

MAY 22 1997

KOPPERS INDS., INC. PORTLAND, OR

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663 Report Date: May 16, 1997 Job Number: 970509Y

PO Number: Verbal - Amos Kamerer

Project No: None Provided Project Name: None Provided

#### **Analytical Narrative**

The sample was received on 05/09/97 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
970509Y-1	WWTKS 1,3,5	Waste Water	05/05/97	0900

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

**Technical Services** 

Lonal Claul

TS /atc

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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					MONTH	MAY	YEAR 97	<b>3</b>								
					FLOW			DAYS OF Engagemy								
			WWT-3			WWT-6	TOTAL		#DAY			TAL	G.P.D.	'	<u> </u>	
GLS. PER TANK	45,000	45,000	45,000	45,000	20,000	20,000	OF TANKS	80,000/001	МО	<u>N T H</u>	E	<u> 211                                   </u>	DISCHARG	- 		
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										min	AVG	MAX	MW.	AVG.	MAX.	UNIT
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OIL & GREASES	6.8 9.8 NO	71			\\					6.0	10	15	6.8 NO	6.8 4.0	9.8	MG/L
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CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 04/30/97

PO#:

PROJECT NAME: WWTks 2,4,6

CI SAMPLE #	CLIENTS ID#	DATE	TIME	DESCRIPTION
970616-001-01 970616-001-02		1.		Wastewater Grab from Tanks 2,4,6 Wastewater Grab from Tanks 2,4,6

REPORT DATE: 05	/01/97	REPORT NUM	PAGE: 1 OF 1			
SAMPLE TEST		PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
WWTks 2.4.6 970616-001-01 0&G, TO EPA 413	TAL, GRAV 3.1/9070	TOTAL OIL & GREASE	9.8	РРМ	2	Dick R.
970616-001-02 PHENOLS		TOTAL RECOVERABLE PHENOLICS	ND	PPM	0.05	Dick R.

Richard D. Reid - Laboratory Director

ORIGINAL

4/30/97 NNTHS 2,46 PH 6.8 T. 62°F

Koppers002569

# Columbia Inspection, Inc. Laboratory • Inspection • Tank Calibration

### **CHAIN OF CUSTODY RECORD**

### **Portland Office**

	= =	Tank Calibration			11/20	1				,					Street,					
Environmental •	Petroleum • OR	Certified Water T	esting	Date	4[30]	197	age_	_	_ of			Phone:	(503) 2	286-94	64 FA3	ር: (503	285-7	831		
Address:	40 No 27/019 3, 286	SIND STHE/S 3681 2852 Substituted in Substituted  25.10	Project Name: _ Project Number  Testing Priority  Normal  Rush  Due Date 5	<u>Notificat</u>	ion Method(s)  Telephone  FAX	Oil-GREAS	Phenols				Analys	ses To	Be Per	rformec						
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CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 05/05/97

PO#:

PROJECT NAME: TANKS 1, 3, & 5 WASTE WATER ANALYSIS

CI SAMPLE #	CLIENTS ID#	DATE	TIME	DESCRIPTION
970634-001-01 970634-001-02		05/05/97 05/05/97	0930 0930	TANKS 1, 3,& 5 WASTE WATER GRAB SAMPLE TANKS 1, 3,& 5 WASTE WATER GRAB SAMPLE

REPORT DAT	E: 05/06/97	REPORT NUM	PAGE: 1 OF 1			
SAMPLÉ	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
	0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	NĐ	PP <b>M</b>	2	Gordon L.
	PHENOLS, TOTAL	TOTAL RECOVERABLE PHENOLICS	0.08	PPM	0.05	Dick R.

### RECEIVED

MAY - 8 1997

KOPPERS INDS., INC. PORTLAND, OR

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5/3/97 WWThs 13,5 62 F 6-8 PH

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Company Name: Koppees Indiac  Attention: Anos Kamerer  Address: 7540 Nov ST Helenses  Fact Tand, Oc 97210  Phone: (503) 2863681  FAX: (503) 285 2831  Sampler: TTrunces Submitted					ty Notific	ation Method(s)  Telephone  FAX  Mail	Oil/Grease	Phenols					alyses To									
Sample id #		Sar	mple Description	on	Sample Matrix	Sample Date	e Sample Time															
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CI Form 100 (COC) Rev A



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PURILAND OR 3/210

PHONE: (503) 286-3681

FAX: (503) 285-2831

DATE SUBMITTED: 05/28/97

PO#:

PROJECT NAME: WWTks 2-4-6

CI SAMPLE # CLIENTS ID# DATE TIME DESCRIP

970734-001-01 05/28/97 1610 Wastewater Grab WWTks 2-4-6

970734-001-02 05/28/97 1610 Wastewater Grab WWTks 2-4-6

REPORT DA	ATE: 05/29/97	REPORT NUM	PAGE: 1 OF 1			
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
970734-001-0	1 0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	2.1	PPM	2	Gordon L.
970734-001-0	2 PHENOLS, TOTAL EPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.07	PPM	0.05	Dick R.

### RECEIVED

JUN - 2 1997

KOPPERS INDS., INC. PORTLAND, OR

REVIEWED BY:

Richard D. Reid - Laboratory Director

COPY

Columbia Inspection, Inc. 7133 N Lombard St. - Portland, OR 97203 (503) 286-9464 Fax (503) 286-5355

# Columbia Inspection, Inc.

### **CHAIN OF CUSTODY RECORD**

### **Portland Office**

Laboratory • Inspection • Tank Calibration	Data			7133 North Lombard Street, Po					
Environmental • Petroleum • OR Certified Water Testing	Date		Page of	Phone: (503) 286-9464 FAX:	(503) 285-7831				
Company Name: Office Industrie	Project Name: WWTk 2	II (1	1	Analyses To Be Performed					
Attention: The Turner	Project Number:	]]]							
Address:	Testing Priority Notificati	ion Method(s)							
Phone: ()	□ Normal								
FAX: ()	Rush	☐ Rush ☐ FAX							
Sampler: TTISKER   Submitted	Due Date	□ Mail	3/2						
Sample id # Sample Description	Sample Sample Matrix Date	Sample Time							
WWTK 2-4-6	WW 5/28	1610	N						
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Relinquished By: Date/Time Received By		Date/Time	FOR LABORA	ATORY USE ONLY N	Viethod of payment				
Received By  Date/Time  5/28/97  16/35			Inspection Sample Num  Laboratory Project Num	☐ Credit					
Relinquished By:  Date/Time  Received By  Column	hia Inspection, True.	Date/Time 5/28/5	Due Date: Sample Disposition.  Norm	Amou	nt Paid: \$				

Koppers002574

PERMITTEE NAME/ADDRESS (Incl Facility Name/Location if different) NAME	ude COPPERS_INDUSTR	TES. INC.	NATION	NAL POLLUTA DISCHARO (2-1		IARGE ELIF	MINATION S	SYSTEM (NPDES RT (DMR) (17-19)	5)				n
	HELENS RD			101003 PERMIT N			DISC	OO1 HARGE NUMBER	3077-J 47430	Form Approv OMB No. 20 Approval ex	40-00		
FACILITY NORTHEST TERM LOCATION MULTNOMAH CO.	IINAL		 FROM	YEAR M 97 04	O DA	то	YEAR 97	MO DAY 04 30 (28-29) (30-31)	NOTE: Read in	structions befor			s form.
PARAMETER		(3 Card Only) QL (46-53)	JANTITY OR (54-6)	LOADING	G (4 Card Oni (38-4)		nly)		CONCENTRATION (54-61)		NO.	FREQUENCY	SAMPLE TYPE
(32-37)		AVERAGE	MAXIM	MUM I	UNITS	MINIMUM		AVERAGE		M UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
	SAMPLE MEASUREMENT	14,667		(	GPD						N/A	12/30	EST.
FLOW	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT					54	;	57	59	FO	0	12/30	GRAB
TEMP	PERMIT REQUIREMENT					N/A	ı	N/A	N/A				
	SAMPLE MEASUREMENT					6.	.9	7.0	7.1	SU	0	12/30	GRAB
pH	PERMIT REQUIREMENT					6.	0	N/A	9.0				
	SAMPLE MEASUREMENT					N.C	) <b>.</b>	1.6	3.8	mg/L	٥	12/30	GRAB
OIL & GREASE	PERMIT REQUIREMENT					N/A	1	10	15				print 1
	SAMPLE MEASUREMENT					N.D.		.08	.17	mg/L	0	12/30	GRAB
PHENOLS	PERMIT REQUIREMENT				·	N/A	1	.5	.7				
	SAMPLE MEASUREMENT								,				
	PERMIT REQUIREMENT												
ž.	SAMPLE MEASUREMENT		·				-					*	
	PERMIT REQUIREMENT							1	100			v 4	
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R.D. COLLINS, V.P.	OBTAINII TRUE. SIGNIFIC	INQUIRY OF THOSE NG THE INFORMATION ACCURATE AND CO ANT PENALTIES FOR SSIBILITY OF FINE AN	I, I BELIEVE TI MPLETE. I AN SUBMITTING F	HE SUBMITTED M AWARE TH FALSE INFORM	D INFORMA HAT THER MATION, INC	TION IS RE ARE CLUDING -			, Plt. Mgr.	503 286	3681	97 0!	-
TYPED OR PRINTED	33 U.S.	C. § 1319. (Penalties and or maximum impriso	under these st	tatutes may in	nclude fines	s up to		DRE OF PRINCI CER OR AUTHO	PAL EXECUTIVE RIZED AGENT	AREA NUMB	ER	YEAR M	O DAY
COMMENT AND EXPLANATION OF	ANY VIOLATIONS (Re	ference all attachment	s here)	<del></del>					<del></del>				

SECOND QUARTER PAH RESULTS ARE ATTACHED



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 04/16/97

PO#:

PROJECT NAME: WW Tanks 1-3-5

CLIENTS 10#

970550-001-01

REPORT DA	TE: 04/16/97	REPORT N	PAGE: 1 OF 1			
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
970550-001-01	PNAH 2	ACENAPHTHENE	0.009	PPM .	0.007	*.
	EPA 625 (SIM)	ACENAPHTHYLENE	0.020	PPM	0.010	
		ANTHRACENE	ND .	PPM	0.001	
		BENZO(A)ANTHRACENE	NED	PPM	0.005	•
		BENZOCAJPYRENE	ND	PPM	0.01	
		BENZO(B)FLUORANTHENE	ND	· PPM	0.0001	
		BENZO(GHI)PERYLENE	NED	PPM	0.0004	
		BENZO(K) FLUORANTHENE	ND	PPM	0.0003	
		CHRYSENE	ND	PPM	0.001	
		DIBENZO(AH)ANTHRACENE	ND	PPM	0.0004	
		FLUCRANTHENE	0.022	PPM	0.001	
		FLUORENE	0.004	PPM	0.001	
		INDENO(1.2,3-CD)PYRENE	ND	PPM	0.001	
		NAPTHALENE	ND	PPM	0.005	
	•	PHENANTHRENE	0.008	PPM	0.001	
		PYRENE	MD	PPM	0.001	
		SURROGATE	ACCEPTABL	LE % RECOVER		

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

					MONTH	April	YEAR 9	2-								
					FLOW			DAYS OF Engessing								
GLS. PER TANK	WWT-1 45,000	WWT-2 45,000	WWT-3 45,000	WWT-4 45,000		WWT-6 20,000	OF TANKS	Amping Bo,000/Am	#DAY M O	S IN N <u>I</u> H	70 -E	tal H	G.P.D. DISCHARG	<b>2</b>	ļ	
# OF PUMPINGS GALS.PUMPED	11 90,000	11	11	1)	11	- 11	/2_	440, 100		Ω			14,667			
					SAMPLE C	ONCENTRA	TION LEVE	s			MIT.	S	Min.	AVG.	MAX.	UNIT
TEMPERATURES PH	54 56 7.1 7.0	57 59 6,9 7.1								6.0		9,0	54 69	57 7.0	59	P F SU
OIL & GREASES PHENOLS	3.8 ND	NO 2.6								0	10	15	N.O.	1.6	3.8	MG/L MG/L
					QUARTERL	Y PAH TES	TING									
		DATE SAM	PLE TAKEN	9 \ 14	197		RESULTS_ (MUST BE LE	63 S THAN 1000	<u> </u>							



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 03/31/97

PO#:

PROJECT NAME: WW Tanks 2-4-6

CI SAMPLE # CLIENTS ID# DATE TIME DESCRIPTION

970461-001-01 03/31/97 WW Tanks 2-4-6 Grab

EPA 420.1

970461-001-02 03/31/97 WW Tanks 2-4-6 Grab

REPORT NUMBER: 970461 PAGE: 1 OF 1 REPORT DATE: 04/01/97 DETECTION LIMIT ANALYST PARAMETER TOTAL OIL & GREASE 3.8 P14 2 Dick R 97046(-001-01 08G, TOTAL, GRAV EPA 413.1/9070 Dick R. 970461-001-02 PHENOLS, TOTAL . TOTAL RECOVERABLE PHENOLICS 0 17 PPM 0.05

REVIEWED BY: A

Richard D. Reid - Laboratory Director

WWTK52,4,6 3/31/97 7.1 PA 54°F

in descriptions in the state of

# Columbia Inspection, Inc. Laboratory • Inspection • Tank Calibration

### **CHAIN OF CUSTODY RECORD**

### **Portland Office**

7133 North Lombard Street, Portland, OR 97203

Environmental •	Petroleum • Ol	R Certified Water T	esting	Date			Page		_ of			Phone:	(503):	286-9	464 FAX	<u>: (503</u>	<u>) 285-7</u>	831		
Company Name	16-11-	10 Tack	2-1	Project Name: _				1				Analys	es To	Be Pe	rforme	<u>i</u>	<del></del>			
Attention:	MAL	Kamen		Project Number																
Address: 75	40 Nn	15THele	10 Rd	1				10												
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FAX: 503,2852831			·····	Rush		☐ FAX		X												
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Koppers002580



970536-001-02

### CERTIFICATE OF ANALYSIS

WASTE WATER GRAB SAMPLE FROM TANKS 1, 3, & 5

CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 04/14/97

04/14/97

PO#:

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE #	CLIENTS ID#	DATE	TIME	DESCRIPTION	
					•
970536-001-01		04/14/97		WASTE WATER GRAB SAMPLE FROM TANKS 1, 3, & 5	

REPORT DATE: 04/15/97	REPORT NUM	PAGE: 1 OF 1			
SAMPLE TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
970536-001-01 0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	ND	PPM	2	Dick R.
970536-001-02 PHENOLS. TOTAL EPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.14	₽₽M	0.05	Dick R.

REVIEWED BY: Karl Oler

RECEIVED

##R 2 1 1997

CPPERSINDS, INC. PORTLAND, OR

Columbia Inspection, Inc. 7133 N Lombard St. - Portland, OR 97203 (503) 286-9464 Fax (503) 286-5355

4/14/97
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# Sample id # Sample Description Koppers002583 Received By: Relinquished By: Date/Time Columbia Inspection. Inc. 1400 Sample Disposition. Normal Special

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Columbia Inspection, Inc. Laboratory • Inspection • Tank Calibration Environmental • Petroleum • OR Certified Water Testing



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

P0#:

DATE SUBMITTED: 04/14/97

PROJECT NAME: WASTE WATER ANALYSIS

CI SAMPLE # (	CLIENTS ID#	DATE	TIME	DESCRIPTION
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EPA 420.1

970541-002-01 WASTE WATER GRAB SAMPLE FROM TANKS 2, 4, & 6 970541-002-02 04/14/97 WASTE WATER GRAB SAMPLE FROM TANKS 2, 4, & 6

REPORT D	ATE: 04/16/97	REPORT NU	REPORT NUMBER: 970541								
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST					
WASTE WATER	GRAB SAMPLE FROM TANI	CS 2, 4, & 6									
970541-002	0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	ND	PPM	2 .	Dick R.					
	PHENOLS, TOTAL	TOTAL RECOVERABLE PHENOLICS	ND ·	PPM	0.05	Dick R.					

REVIEWED BY: 2

4/14/97 WW Ths 2-4-6 57°F 6-9 PH

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Laborato	Columbia Paspection, Pac.  Laboratory • Inspection • Tank Calibration  Environmental • Petroleum • OR Certified Water Testing				CHAIN OF CUSTODY RECORD  Date 4/14/97 Page ) of							Portland Office 7133 North Lombard Street, Portland, OR 97203 Phone: (503) 286-9464 FAX: (503) 285-7831							
Company Name: Keppers Ind Inc.  Attention: Amos Kanzeer  Address: 7540 Must Helens ref  Don Thank De  Phone: 567, 286, 368/  FAX: 503, 285, 283/  Sampler: 77-Turnel Submitted			Project Name:  Project Number:  Testing Priority Notification Method(s)  Normal Telephone  Rush FAX  Due Date ASAP Mail						Analyses To Be Performed										
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CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 04/22/97

PO#:

PROJECT NAME: WASTE WATER ANALYSIS FROM TANKS 1,3, & 5

CI SAMPLE # CLIENTS ID# DATE TIME DESCRIPTION

970585-001-01 04/23/97 0900 WASTE WATER GRAB SAMPLE FROM TANKS 1.3, & 5

970585-001-02 04/23/97 0900 WASTE WATER GRAB SAMPLE FROM TANKS 1.3, & 5

REPORT DATE: 04	/24/97	REPORT NUMBER: 970585								
SAMPLE TEST	PARAMETER	RESUL		DETECTION LIMIT	ANALYST					
970585-001-01 0&G, TO EPA 413	TAL, GRAV TOTAL OIL & GR 3.1/9070	EASE 2.6	PPM	2	Dick R.					
970585-001-02 PHENOLS EPA 420		BLE PHENOLICS ND	PPM .	0.05	Dick R.					

REVIEWEN RY-

Richard D. Reid - Laboratory Director

4/23/97 WWTKS 1,3,5 7.1 Ph 590 F

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Columbia Inspection, Inc.			CHAIN OF CUSTODY RECORD								Portland Office								
	y • Inspection • Tank Calib			11/22	100		,		,	7133 North Lombard Street, Portland, OR 97203									
Environmental •	Petroleum • OR Certified	Water Testing	Date	4/22/	7/	Page_		_ of			Phone:	(503)	<b>286-</b> 94	164 FA	X: (50	3) 285-	7831		
Company Name:	KOPPERS I	INC.	Project Name:							T	Analyses To Be Performed						T		
Attention:	MOS KAME	Re_	Project Number:  Testing Priority Notification Method(s)				$\bigcup$			Ì					1	1	Ì	1	
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CI Form 100 (COC) Rev A

PERMITTEE Facility Nam NAME	NAME/ADDRESS (Include e/Location if different)	KOPPERS IND	o. INC.	DISCH	LUTANT DISCI ARGE MON	HARGE ELIMINATION NITORING REP	ON SYSTEM (NPDES ORT (DMR) (17-19)	5)				
ADDRESS	7540 NW ST HELE PORTLAND, OR 97			101003 PERMIT NUMBER		D	OOL	3077 <b>-</b> J	Form Approv OMB No. 20			
	NORTHWEST TERMI	NAT		- [	MONIT	ORING PER	ОО	47430	Approval exp	pires 1	0-31-94	
LOCATION	MULTNOMAH CO.	<u> </u>		FROM 07	мо DA	<del></del>	<del></del>		*			
	<del></del>		·	97	1 197	(28-29) (30-31)	nstructions befor	e com	pleting thi	s form.		
	PARAMETER		(3 Card Only) QU (46-53)	ANTITY OR LOADIN	(22-23) (24 IG	(4 Card Only) (38-45)		CONCENTRATION (54-61)		NO.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMU	IM UNITS	(62-63)	(64-68)	(69-70)
	-	SAMPLE MEASUREMENT	17,742		GPD					N/A	15/31	EST.
	FLOW	PERMIT REQUIREMENT		Secretary and the								
		SAMPLE MEASUREMENT				48	50	53	o <sub>F</sub>	0	15/31	GRAB
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	pН	PERMIT REQUIREMENT	· Company			6.0	-	9.0		- 1		
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R.D.	COLLINS, V.P.	OBTAINII TRUE, SIGNIFIO THE PO	NG THE INFORMATION, ACCURATE AND COM CANT PENALTIES FOR PSSIBILITY OF FINE AN	INDIVIDUALS IMMEDIATED IN BELIEVE THE SUBMIT OF ALSE INFO DIMPRISONMENT. SEE	TTED INFORMATE THAT THEIR THAT THEIR THAT THEIR THAT THEIR THAT THEIR THAT THEIR THAT THEIR THAT THEIR THAT THEIR THAT THAT THEIR THAT THAT THAT THAT THAT THAT THAT THA	ATION IS RE ARE CLUDING XX1 AND SIGNA	Kamerer, P		503-286-36	581	97 0	4 17
	TYPED OR PRINTED	\$10,000	and or maximum imprison	under these statutes ma ment of between 6 months	y include fine and 5 years.)	s up to	ICER OR AUTHOR		AREA NUMB	ER	YEAR M	O DAY
COMMENT A	ND EXPLANATION OF AN	Y VIOLATIONS (Re	ference all attachments	here)				-				

first quarter PAH test results are attached, SEE LETTER ATTACHED



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 03/06/97

PO#:

PROJECT NAME: WASTE WATER TANKS 1-3-5

CI SAMPLE #	CLIENTS ID#	DATE	TIME	DESCRIPTION
97031/-001-01		03/06/97	0080	WASTE WATER GRAB SAMPLE
970317-001-02		03/06/97	0800	WASTE WATER GRAB SAMPLE
970317-001-03		03/06/97	0800	WASTE WATER GRAB SAMPLE

REPORT DA	TE: 03/13/97	REPORT NUM	PAGE: 1 OF 2			
SAMPLE	1EST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
970317-001-01	08G. TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	5.1	PPM	2	Dick R.
970317-001-02	PHENOLS, TOTAL EPA 420.1	TOTAL RECOVERABLE PHENOLICS	.051	РРМ	0.05	Dick R.
970317~001-03	PNAH 1 EPA 8270M (SIM)	ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(A)ANTHRACENE BENZO(A)PYRENE BENZO(B)FLUORANTHENE BENZO(GHI)PERYLENE	0.0091 0.0010 0.013 0.45 6.25 0.024 0.23	PPM PPM PPM PPM PPM PPM PPM	0.00005 0.00005 0.00005 0.00005 0.0005 0.0005 0.0005	Jacob F.

COPY

Columbia Inspection, Inc. 7133 N Lombard St. - Portland, OR 97203 (503) 286-9464 Fax (503) 286-5355

REPORT D	DATE: 03/13/97	REPORT N	PAGE: 2 OF 2			
SAMPLE	TEST	PARAMETER	RESULT	UNLI	DETECTION LIMIT	ANAL YS I
970317-001-03 PNAH 1 EPA 8270M (SIM)		BENZO(K)FLUORANTHENE	0.20	PPM	0.0005	Jacob f.
		CHRYSENE	0.055	PPM	0.00005	
		DIBENZO(AH)ANTHRACENE	0.057	PPM	0.0005	
		FLUORANTHENE	0.13	₽ <b>PM</b>	0.00005	
		FLUORENE	0.0085	PPM	0.00005	
		INDENO(1.2.3-CD)PYRENE	0.057	PPM	0,0005	
		NAPTHALENE	0.00096	PPM	0.00005	
		PHENANTHRÊNE	0.058	PPM	0.00005	
		PYRENE	0.11	PPM	0.00005	
		SURROGATE	94%	*RECOVERY	50%-150%	

1.65356



3/5/98 WWTKS 1-3-5 6.9 PH 480 F

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	11 ment let						_			Analy	ses To	Be P	erform	ed				
Company Name:	Koppers Ind INC	Project Name: _						1										
Attention:	MOS haverer	Project Number	:			1		63						ĺ			1	
Address: 7	ETTAND ON 97210	Testing Priority Notification Method(s)  Normal □ Telephone				10	A	14										
B	13, 2863681	☐ Normal	2	0	H	20												
FAX: <u>50</u>	3, 285-2231	Rush 🗆 FAX			10	5		<sup> </sup>										
Sampler: Z	Turven Submitted	Due Date		] Mail	50													
Sample id #	Sample Description	Sample Matrix	Sample Date	Sample Time														
·	WWTK5 1-3-5		3-6-97	0800	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	X	X											
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**CHAIN OF CUSTODY RECORD** 

**Portland Office** 

7133 North Lombard Street, Portland, OR 97203

Phone: (503) 286-9464 FAX: (503) 285-7831

Columbia Inspection, Inc.

Laboratory • Inspection • Tank Calibration

Environmental • Petroleum • OR Certified Water Testing



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PHONE: (503) 286-3681 FAX: (503) 285-2831

PORTLAND OR 97210-3663

DATE SUBMITTED: 03/10/97

PO#:

PROJECT NAME: Wastewater Tank Tests

CLIENIS 10# CI SAMPLE # BTAD

970336-001-01 03/10/97 1200 WW tks 1-3-5 970336-001-02 03/10/97 1200 WW tks 1-3-5

REPORT DA	TE: 03/20/97	REPORT NUM	PAGE: 1 OF 1			
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION (IMI)	ANALYST/DATE
970336~001~0)	O&G. TOTAL. GRAV EPA 413.1/9070	TOTAL OIL & GREASE	ND	PPM	2	Dick R. 03/14/9/
970336-001-02	PHENOLS, TOTAL EPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.05	PPM	0.05	Dick R. 03/13/9/

REVIEWED BY:

Richard D. Reid - Laboratory Director

3/10/97 50°F 7.1PH WNTKS1-3-5

## Columbia Inspection, Inc.

### **CHAIN OF CUSTODY RECORD**

### **Portland Office**

Laboratory • Inspection • Tank Calibration 7133 North Lombard Street, Portland, OR 97203 Environmental • Petroleum • OR Certified Water Testing Date Phone: (503) 286-9464 FAX: (503) 285-7831 Analyses To Be Performed Company Name: Koppers Ind INC.

Attention: AMOS Kamerer Project Name: Project Number: Address: 7540 Nw ST Helens Rd ParTland Ox 97210 Testing Priority Notification Method(s) □ Normal Telephone | Phone: (303) 286 3681 ☐ FAX FAX: 503, 2852831 Sampler: T. Tarker D Submitted ☐ Mail Due Date Sample Sample Sample Date Time Sample id # Sample Description Matrix WWTLS 1-3-5 1200 Received By: FOR LABORATORY USE ONLY Method of payment 3/10/97 Inspection Sample Number: PO# ☐ Credit Laboratory Project Number: Cash/Check# Relinquished By Date/Time Due Date: Amount Paid: \$ Sample Disposition: 

Normal 

Special Columbia Inspection. In

White Copy - Laboratory Yellow Copy - Client Copy

Koppers002597

CI Form 100 (COC) Rev A



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PHONE: (503) 286-3681 FAX: (503) 285-2831

PORTLAND OR 97210-3663

DATE SUBMITTED: 03/14/97

PO#:

PROJECT NAME: WMTks 2.4.6

CI SAMPLE # CLIENTS ID#

EPA 420.1

DATE

TIME DESCRIPTION

970364-001-01 WWT 2,4,6

03/13/97 1430 Wastewater Grab

970364-001-02 WWT 2,4,6

03/13/97 1430 Wastewater Grab

REPORT DA	TE: 03/20/97	REPORT NUM	REPORT NUMBER: 970364								
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION:	ANALYST					
970364-001-01	0&G, TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	ND	PPM	2	Dick R.					
970364-001-02	PHENOLS, TOTAL	TOTAL RECOVERABLE PHENOLICS	0.14	PPM	0.05	Bick R.					

REVIEWED BY:

Richard D. Reid Laboratory Director

3/13/97 7,2 PH 51°F WWTKS ZYG

Koppers002600

Col	umbia	Inspec	tion,	70
Labo	ratory • Ins	pection • Tar	nk Calibra	ation
vironme	ntal • Petrol	leum • OR C	ertified W	ater
Jammany N	ama: Ka	in-oc	TN	

### CHAIN OF CUSTODY RECORD

### Portland Office

Laborato	ry • Inspection • T	ank Calibration		·								7133 1	Iorth L	omba	rd Stre	et, Po	rtland	i, or	<b>972</b> 03		
Environmental	• Petroleum • OR	Certified Water T	esting	Date			Page_		_ of _		-	Phone	: (503)	286-9	464 ]	FAX: (	(503)	285-7	831		
Address: 7	Koppers nos Ka 540 Nm S 2 Tland, 3) 2863 3) 2852	THelens, On 97- 8681	210	Project Name: _ Project Number  Testing Priority  Normal  Rush  Due Date	Phenols Dil Grease					Analy	ses To	BeP	Perfon	med							
Sample id #	Sarr	ple Description		Sample Matrix	Sample Date	Sample Time	1 0														
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CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 03/19/97

PO#:

PROJECT NAME: WW Tks 1.3.5

CI SAMPLE #	CLIENTS ID#	DATE	TIME	DESCRIPTION
970401-001-01		03/19/97	1400	Wastewater Grab from Tanks 1,3,5
970401-001-02		03/19/97	1400	Wastewater Grab from Tanks 1,3,5

REPORT DA	TE: 03/20/97	REPORT NUM	PAGE: 1 OF 1			
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
970401~001-01	0&G. TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	4.1	PPM	2	Dick R.
970401-001-02	PHENOLS, TOTAL EPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.08	PPM	0.05	Dick R.

3/19/97 WWThs 1-3-5 50 OF 7.0 PH

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Colum	rbia Inspection, Inc.	CHAIN OF CUSTODY RECORD Portland Office							
Laborator	ry • Inspection • Tank Calibration				7133 North Lomba	ard Street, Portland, OR 97203			
Environmental	Petroleum • OR Certified Water Testing	Date	<i>9/97</i> I	Page of	Phone: (503) 286-	9464 FAX: (503) 285-7831			
Company Name:	Koppers Ind Inc	Project Name:			Analyses To Be I	Performed			
Attention:	Mospers Ind Inc	Project Number:		70					
Address: Z5 5	10 Nu 5T He fens Rd.	Tracing Delectry	16 - Air - 16 - 16 - 16 - 16	39					
II '	Tland, On 97210		ification Method(s)	301					
Phone: <u>50</u>	3,284.3181	Normal	Telephone	93					
	3,2852834	Rush	☐ FAX	18/8					
Sampler:	Turver D Submitted	Due Date	_	8					
		Sample Sam	ple Sample	, 1/0					
Sample id #	Sample Description	Matrix Da	te Time						
	WWIKS 1, 3,5	3/19	197 1400	<b>レ</b> ス					
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05/1				Inspection Sample	Number:	P0#			
Relinquished By:	Date/Time Received By	7 1	Date/Time	Laboratory Project	Number:	☐ Credit ☐ Cash/Check #			
	Ku	1/2-1	3/19/97	Due Date:		Amount Paid: \$			
	Columbi	a Inspection. Inc.	1615	Sample Disposition.					



CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663 PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 03/07/97

PO#:

PROJECT NAME: WW Tanks 2.4, &6

CI SAMPLE # CLIENTS ID# DATE TIME DESCRIPTION

970326-001-01 03/07/97 0800 Wastewater Grab from Tanks 2.4, & 6

970326-001-02 03/07/97 0800 Wastewater Grab from Tanks 2.4, & 6

REPORT DATE: 03/07/97 REPORT NUMBER: 970326 PAGE: 1 OF 1 DETECTION SAMPLE TEST PARAMETER RESULT UNIT LIMIT ANALYST 970326-001-01 0&G, TOTAL, GRAV TOTAL OIL & GREASE PPM 2 Dick R. 6.8 EPA 413.1/9070 970326-001-02 PHENOLS, TOTAL TOTAL RECOVERABLE PHENOLICS 0.093 PPM 0.05 Dick R. EPA 420.1

REVIEWED BY:

Richard D. Reid - Laboratory Director

Columbia Inspection, Inc. 7133 N Lombard St. - Portland, OR 97203 (503) 286-9464 Fax (503) 286-5355

CA, GINAL

2/7/97 ww Tks 2, 4,6 7.3 Ph 53° F

### Notification Method(s) Testing Priority ☐ Normal Telephone ☐ FAX ☐ Mail Due Date Sample Sample Sample Date Time Sample id # Sample Description Matrix 0800 Received By: Relinquished By: FOR LABORATORY USE ONLY Inspection Sample Number: ☐ Credit Laboratory Project Number: ☐ Cash/Check # Date/Time

Columbia Inspection.

Project Name: Project Number:

CHAIN OF CUSTODY RECORD

Columbia Inspection, Inc.

Environmental • Petroleum • OR Certified Water Testing

Laboratory • Inspection • Tank Calibration

Sample Disposition: 

Normal D Special

Due Date:

Method of payment

PO#

Amount Paid: \$

Portland Office

Analyses To Be Performed

7133 North Lombard Street, Portland, OR 97203

Phone: (503) 286-9464 FAX: (503) 285-7831

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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NAME/TITL	E PRINCIPAL EXECUTIVE	AND AN	M FAMILIAR WITH THE	OF LAW THAT I HAVE P	D HEREIN; AND	BASED	A.		TELEPHON	/E	1	DAT	E			
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	TYPED OR PRINTED	33 U.S \$10,000	S.C. § 1319. (Penalties and or maximum imprisor	under these statutes ma nment of between 6 months	ry include fine and 5 vears.)	sup to 1	ICER OR AUTHOR		AREA NUM	AFR	YEAR	МО	DAY			



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 02/12/97

PO#: /

PROJECT NAME: WW 1.3,5

CI SAMPLE #	CLIENTS ID#	DATE	TIME	DESCRIPTION
				~^^&
970211-001-01	WW 1,3,5	02/12/97	1300	Wastewater Grab
970211-001-02	WW 1.3.5	02/12/97	1300	Wastewater Grab

REPORT DAT	TE: 02/14/97	REPORT NUM	MBER: 9/0	PAGE: 1 UF 1		
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYST
MM 1.3.5 970211-001-01	O&G. TOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	3.0	PPM .	2	Dick R.
970211-001-02	PHENOLS, TOTAL FPA 420 1	TOTAL RECOVERABLE PHENOLICS	0.07	PPM	0.05	Oick R.



CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831

DATE SUBMITTED: 02/21/97

PO#:

PROJECT NAME: WASTE WATER ANALYSIS FOR TANKS 2,4, &6

CI SAMPLE # CLIFNTS TO# DATE TIME DESCRIPTION 970252-001-01 WW 2,4 & 6 02/20/97 1530 WASTE WATER GRAB SAMPLE 970252-001-02 WW 2.4 & 6 02/20/97 1530 WASTE WATER GRAB SAMPLE

REPORT DA	TE: 02/27/97	REPORT NUM	PAGE: 1 OF 1			
SAMPLE	TEST	PARAMETER	RESULT	UNIT	DETECTION LIMIT	ANALYS1
970252-001-01	0&G. FOTAL, GRAV EPA 413.1/9070	TOTAL OIL & GREASE	ND	PPM	2	Dick R.
970252-001-02	PHENOLS, TOTAL EPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.12	PPM	0,05	Dick R.

REVIEWED BY:

Richard D. Reid - Laboratory Director

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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# OF PUMPINGS											<u>                                  </u>		<u> </u>	
GALS.PUMPED	45	45	45	15	20	20	220,000	28			7,857	·	<u> </u>	ļ
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2/21/97 WWTKS 2-4-6 51°F 7.1 PH

# Phone: (503) 286-3681 FAX: (503) 285-2831

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### Portland Office

Columbia Inspection, Inc. Laboratory • Inspection • Tank Calibration 7133 North Lombard Street, Portland, OR 97203 Environmental • Petroleum • OR Certified Water Testing Phone: (503) 286-9464 FAX: (503) 285-7831 Analyses To Be Performed Company Name: Koppers Ind INC Project Name: Project Number: Testing Priority Notification Method(s) ☐ Normal ☐ Telephone ☐ FAX ☐ Mail Sample Sample Sample Sample id # Sample Description Matrix Date Time 2/20/97 WWTKS 2.46 FOR LABORATORY USE ONLY Method of payment Inspection Sample Number: ☐ Credit Laboratory Project Number: ☐ Cash/Check # Received By: Relinquished By: Due Date: Amount Paid: \$ Columbia Inspection. Inc. Sample Disposition: 

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CI Form 100 (COC) Rev A

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Columbia 7	uspection,	Tuc.
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### **CHAIN OF CUSTODY RECORD**

### **Portland Office**

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Environmental •	• Petroleum • Ol	R Certified Water T	esting	Date	2/12	79/1	Page _		of		Phone	: (503)	286-94	64 FAX:	(503)	285-7	831		
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Amos S. Kamerer

Koppers Industries, Inc. 7540 N.W. St. Helens Road Portland, OR 97210-3663

> Telephone: 503-286-3681 Fax: 503-285-2831

February 24, 1997

Mr. Neil J. Mullane, Manager Water Quality Source Control D.E.Q. 2020 SW Fourth Ave., Suite 400 Portland, Oregon 97201-4987

Reference:

Facility No. 47430

WQ-NWR-97-002

Notice of Noncompliance

Dear Mr. Mullane,

This is to acknowledge your January 22, 1997 Notice of Noncompliance.

I simply wanted to confirm our inadvertent error and to assure you that we have taken measures to make sure that this does not happen again.

Sincerely,

mos S. Kamerer

cc: Elliot Zais, DEQ

W. E. Swearingen, KII

22 January 1997



AMOS S KAMERER
PLANT MANAGER
KOPPERS INDUSTRIES INC
7540 NW ST HELENS RD
PORTLAND OR 97210

RECEIVED

DEPARTMENT OF ENVIRONMENTAL

Jak 27 1997

QUALITY

KOPPERS INDS., INC. PORTLAND, OR

NORTHWEST REGION

Re:

WQ-Multnomah County Koppers Industries, Inc.. Facility No. 47430 WQ-NWR-97-002

**NOTICE OF NONCOMPLIANCE** 

Dear Mr. Kamerer:

A review of your facility's discharge monitoring report for November 1996 shows that the following exceedences occurred at the above facility in November 1996:

Maximum phenol concentration in effluent 0.86 mg/L (allowable is 0.7 mg/L) Average phenol concentration in effluent 0.52 mg/L (allowable is 0.5 mg/L)

The above exceedence is a Class II violation of your NPDES permit. Oregon Administrative Rule 340-12-041(2)(c) provides that a permittee shall not receive more than three NONs for Class II violations of the same permit within a thirty-six (36) month period without being issued a more formal enforcement action called a Notice of Permit Violation (NPV). The Department may, however, issue an NPV prior to the third NON. The Department requests your cooperation in ensuring that this violation does not recur.

If the Department can be of any help in preventing further violations, please call Elliot Zais at 229-5292.

Sincerely,

Neil J. Mullane, Manager

Jeilf. Mullare

Water Quality Source Control

John A. Kitzhaber



**EJZ** 

cc:

WQ

**Enforcement** 

Post-It™ brand fax transmittal memo 7671 # of pages >

To B. Sweapingen From Amos

Co. K-1800 Dec. Pon-land

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Co

2020 SW Fourth Avenue Suite 400 Portland, OR 97201-4987 (503) 229-5263 Voice TTY (503) 229-5471 DEO-1

PERMITTEI Facility Na. NAME	E NAME/ADDRESS (Include me/Location if different)	KOPPERS IND.	TNIC	NATIO	DISCHA	RGE MOI	HARGE EL NITORIN	IMINATION	RYSTEM (NPDE ORT (DMR)	ES)					
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#### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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## CERTIFICATE OF ANALYSIS

CLIENT: KOPPERS INDUSTRIES, INC. 7540 NW ST. HELENS ROAD PORTLAND OR 97210-3663

PHONE: (503) 285-3681 FAX: (503) 285-1831

DATE SUBMITTED: 01/28/97

PO#:

PROJECT NAME:

CT SAMPLE #	19#	DATE	TIME	DESCRIPTION
** ****				
970132-001-01	6.5 TAN	01/28/97	1300	WASTE WATER GRAB SAMPLE
970132-001-02	WAT 1 3.5	01/28/97	1300	WASTE WATER GRAB SAMPLE
970132-002-03	WNT 2.4.6	01/28/97	1300	WASTE WATER GRAB SAMPLE
970132-002-02	WHT 2,4,5	01:28/97	1300	WASTE WATER GRAB SAMPLE

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REVIEWED BY.

Martin Little - Laboratory Manager

1-28-97 WWT 1-3-5 7.0 Ph 46° F

WWT24,6 1,28-97 7,2 PH 440F

# Koppers002623

Columbia Inspection, Inc.  Laboratory • Inspection • Tank Calibration  nvironmental • Petroleum • OR Certified Water Testing	Date	7133 North Lombard Street, Portland, OR 97203 Phone: (503) 286-9464 FAX: (503) 285-7831
Attention: AMOS KAMTRER Address: 7540 NWST Helens  Rd Partland, Original Phone: (503) 2863681  FAX: 503) 2852831  Sampler: TTTUNER   Submitted	Project Name: Project Number:  Testing Priority Notification Method(s)  Normal Telephone Rush FAX  Due Date Mail	Analyses To Be Performed
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Date/Time

Columbia Inspection, Inc.

CI Form 100 (COC) Rev A

Cash/Check #

Amount Paid: \$

Laboratory Project Number:

Sample Disposition. □ Normal □ Special\_

Due Date:

January 26, 1997

Amos S. Kamerer, Plant Manager Koppers Industries, Inc. 7540 NW St. Helens Rd. Portland, Or. 97210

Dear Sir:

On this date I have done a full walk thought inspection of plant operations and I find the lower tank farm flooding, all waste water tanks overflowing, and rain still falling.

If this situation continues, we will sustain further damage than we have already to pumps, motors and other equipment. Due to this situation, I started pumping the overflow of rainwater directly to the plant outfall. We will continue this until we are out of danger.

Sincerely,

General Foreman

## **KOPPERS**

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Name/Location if different)  KOPPERS INDUSTRIES  ADDRESS 7540 NW ST HELE  PORTLAND, OR 97	NS ROAD			ARGE MO (2-16) 1003	NITORING REPO	N SYSTEM (NPDES ORT (DMR) (17-19) O2 HARGE NUMBER	F	form Approved MB No. 2040 Approval expir	-0004	30-91.	
ACILITY NORTHWEST PLANT OCATION MULTNOMAH COUNT			FROM 95 (20-21)			0D DAY 02 28 (28-29) (30-31)	NOTE: Read inst	tructions befo	re com	npleting th	is form.
PARAMETER		(3 Card Only) QU (46-53)	ANTITY OR LOADII (54-61)	NG	(4 Card Only) (38-45)	QUALITY OR C (46-53)	ONCENTRATION (54-61)		NO.	FREQUENC	7405
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
	SAMPLE MEASUREMENT	14,286							N/A	10/28	B EST.
FLOW	PERMIT REQUIREMENT	N/A	N/A								
	SAMPLE MEASUREMENT				43	46	50		0	10/28	B GRAB
TEMPERATURE	PERMIT REQUIREMENT						110	°F			
	SAMPLE MEASUREMENT				6.5	6.5	6.6		0	10/28	B GRAB
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OIL & GREASES	PERMIT REQUIREMENT				N/A	10	15	mg/L			
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R. D. COLLINS, V.P.	THE PO	SSIBILITY OF FINE AN	ID IMPRISONMENT SEE der these statutes may t f between 6 months and 5	: 18 USC \$ Include fines un	1001 AND SIGNAT	URE OF PRINCI	DITED AGENT A	03 286-3 REA NUMB			03 01 MO DAY

QUARTERLY PAH TEST RESULTS ARE ATTACHED.

cc: W. E. SWEARINGEN

#### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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						Feb.							
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					FLOW								
	1404FT 4	1404/7 0	1400E 0			14045 0	TOTAL		#5.4V6 (N	0.00			
GLS, PER TANK	WWT-1 45,000	WWT-2 45,000		WWT-4 45,000	<u>WWT-5</u> 20,000	WWT-6 20,000	TOTAL		#DAYS IN MONTH	G.P.D. DISCHAR	GE		
# OF PUMPINGS	1/	11	11	11	1/		10					_	
GALS.PUMPED	90,000	90,000	90,000	90,000	40,000		400,000		28	14,286			
					SAMPLE C	ONCENTRA	TION LEVE	S					
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#### **Analytical Data**

Koppers Industry

Job Number: 950202U Page Number: 3 of 3

Lab Sample ID: 950202U-2

Field ID: WWT 2/4 Composite

Date/Time: 02/02/95 1200 Matrix: Waste Water

Analysis Performed: Polynuclear Aromatic Hydrocarbons in waste water by EPA Method 8310, HPLC.

	Detection	Analytical
Compound	Limit	Results
Acenaphthene	500	ND
Acenaphthylene	500	ND
Anthracene	100	ND
Benzo(a)anthracene	15	45
Benzo(b)fluoranthene	20	58
Benzo(k)fluoranthene	15	38
Benzo(g,h,i)perylene	15	38
Benzo(a)pyrene	15	43
Chrysene	20	22
Dibenzo(a,h)anthracene	15	ND
Fluoranthene	100	ND
Fluorene	200	ND
Indeno(1,2,3-c,d)pyrene	20	25
Naphthalene	500	ND
Phenanthrene	200	ND
Pyrene	200	ND
n i dan i dan i		269

Results expressed as  $\mu g/L$  unless otherwise noted.

ND means none detected at or above the detection limit listed.

1-30-95	PH 6.5	Temp 48
WWT3	6.6	48
wwT 5	6.6	48

## Koppers002641

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230

(503) 254-1794 FAX: (503) 254-1452

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: AMOS Kamerer Company Name: KOPPERS INC  Address: 7540 IVW ST. Helans Portland OR, 97210  Phone: (503) 186 3186 FAX: (503) 185 287  Report Instructions:	Sample Turnaround	Reporting Request  FAX (T-35)  Verbals (T-1157)  Extra Report Copy (T-140 (Fees Associated)  Initials:	Job Number: // / / / / / / / / / / / / / / / / /	Billing Code: 1 2 3 4			
Sample ID  Wat 1, 3, 5  Composit		Time - 1:98	Analysis Requested  Oil C Grase  Phends	Test/Profile			
Sample Comments:  Sampled by: (Please Print)  Brad Harword  White Copy - Laboratory Copy Yellow Copy - Client Copy  SHADED AREAS FOR LABORATORY USE ONLY	Relinquished by: (Please Sign)  Kay Hay fivor I	Date Time 1-30-95 6 93 1.31 95 1/35	Received by: (Sign)  My Mu  LANGE AND MARKET AND AND AND AND AND AND AND AND AND AND	Date Time 13195 11 35			

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory usefonly. Please Do Not Write in These Areas

REPORT ATTENTION - Name of the person who regelves the laboratory report

COMPANY NAME Name of the company or individual requising the analysis.

REPORT ADDRESS: Address of the company or individual requesting the analysis. (Address where report should be mailed

REPORT INSTRUCTIONS .- A brief description of any special mail instructions, or address information pertaining to extra report

copie

PROJECT NAME - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - Applies only to samples submitted by the customer. This data is provided at the sustomer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report

COLLECTION DATE - The date on which the sample s was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY The person who collected the sample(s) signs here:

**RELINQUISHED BY** - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

#### PRICING AND CHARGES

Prices to be charged for work performed for CLIENT are those currently published in the Coffey Laboratories, Inc. (CLI) standard pricebook. CLIENT must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. All submissions of samples with testing requirements to CLI will be understood to be an agreement for services. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

#### DELIVERY AND LIABILITY LIMITATIONS

CLI will analyze samples provided by CLIENT as requested by CLIENT in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP). The maximum total liability assumed by CLI for work performed for CLIENT will in all cases be-limited to the cost of the analysis. The specific format of the deliverable goods will be defined by CLIENT to CLI upon transfer of the samples to CLI. This warranty supersedes all other warranties:

#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Attention: Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663 Report Date: February 6, 1995

Job Number: 950131G

PO Number: None Provided Project No: None Provided Project Name: None Provided

#### **Analytical Narrative**

The sample was received on 01/31/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
950131G-1	WWT 1,3,5 Composite	Waste Water	01/30/95	1800

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Nonel Chul

Rona A. Klueh Technical Director

RAK/atc



#### **Analytical Data**

Koppers Industry

Job Number: 950131G Page Number: 2 of 2

Lab Sample ID: 950131G-1

Field ID: WWT 1,3,5 Composite

Date/Time: 01/30/95 1800 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	<u>Limit</u>	Result	<u>Units</u>	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	02/01/95	WKK
Total Phenols	EPA 420.1	0.05	0.18	mg/L	02/01/95	SVS

ND means none detected at or above the detection limit listed.

## RECEIVED

FEB - 8 1995

KOPPERS INDS., INC. PORTLAND, OR

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## Koppers002647

Portland, OR 97230

(503) 254-1794 FAX: (503) 254-1452

## COFFEY LABORATORIES, INC.

PORTLAND BRANCH 12423 NE Whitaker Way

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: DMOS Kamerek Company Name: FOPFers FMC  Address: 2540 Nw 5t. Helens RD. Portrand, OR, 97210-3663  Phone: (503,286-3681 FAX: (503), 285-2831  Report Instructions:	Standard Priority (1	e Turnaround  1.5x Std. Fee)  Std. Fee)  y (3x Std. Fee)	FAX (I	•	Card #:  Cash / Check: \$ #:	Z DNEW
Sample ID	Loc.	ID Colle	ction Time	Media	Analysis Requested Test	Profile
wwT 2/4 comPosite		2-1-95	1000		Oil & Grease	
wint 2/4 composite	2	2-1-95	poo		Phenols	
aut 7/4 confosite		22-85	1000		PAH	
,						
Sample Comments:				1		
Sampled by: (Please Print)  1  5 incl Nat word  Ria	Relinquished by:	(Please Sign)	Date 7-2-9	100		ime
White Copy - Laboratory Copy Yellow Copy - Client Copy SHADED AREAS FOR LABORATORY USE ONLY	Mu					(I)

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION -. Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

PROJECT NAME - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

1 1

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific boule.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here:

RELINOUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

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RECEIVED BY. The person who receives the sample(s) signs here and fills in the date/time received. The date and

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JOB OR SAMPLE REMARKS - General sample or job remarks.

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CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

. .

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Attention: Amos Kamerer

**Koppers Industry** 

7540 NW St. Helens Rd. Portland, OR 97210-3663

Report Date: February 6, 1995

Job Number: 950202U

PO Number: Amos Kamerer Project No: None Provided

Project Name: None Provided

#### **Analytical Narrative**

The samples were received on 02/02/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
950202U-1	WWT 2/4 Composite	Waste Water	02/01/95	1000
950202U-2	WWT 2/4 Composite	Waste Water	02/02/95	1200

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Nonollul

Rona A. Klueh Technical Director

RAK/atc



#### **Analytical Data**

Koppers Industry

Job Number: 950202U Page Number: 2 of 3

Lab Sample ID: 950202U-1

Field ID: WWT 2/4 Composite

Date/Time: 02/01/95 1000 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	<u>Limit</u>	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	6.	mg/L	02/01/95	WKK
Total Phenols	EPA 420.1	0.05	0.08	mg/L	02/03/95	SVS



Telephone: 503-286-3681 Fax: 503-285-2831

17 February, 1995

Amos S. Kamerer, Plant Manager Koppers Industries, Inc. 7540 NW St Helens Road Portland, OR 97210

Dear Sir:

On February 16, 1995 we came in at 6:30 a.m. to start plant operations. Upon doing a full-plant walk-through inspection, I found the lower tank farm flooding, all waste water tanks overflowing, and rain still falling.

If this situation continues, we are in danger of losing pumps and equipment, and a possible shut-down of operations. We started pumping the overflow of rainwater directly to the plant outfall. We at this time also sampled all waste water tanks and requested rush analysis.

Y. J. Turner

Sincerely

General Foreman

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## Koppers002653

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: AMOS Kamever Company Name: KOPPers Ind.  Address: 7540 Nw St. Helens 171  Portland OR. 97210-366  Phone: 503 186-368 FAX: 503 285-38  Report Instructions:	3	Sample Turnaround  Standard  Priority (1.5x Std. Fee)  Rush (2x Std. Fee)			☐ FAX	Reporting Request  FAX (T-35)  Verbals (T-1157)  Extra Report Copy (T-1402) (Fees Associated)  Initials:			FOR LABORATORY USE ONLY  Job Number: WET SUPERING OF S		
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White Copy - Laboratory Copy Yellow Copy - Client Copy		///	- <del> </del>		1		- J.V.		x 3/1/2 1/1/2	<b>}</b>	]
SHADED AREAS FOR LABORATORY USE ONLY	Javin	1			216	95	8:50	LAB	wall Duke ld	2//	192

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

**PROJECT NUMBER** - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

**RELINQUISHED BY** - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession.

RECEIVED BY! The person who receives the sample(s) signs here and fills in the date/time received. The date and

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JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

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#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Attention: Amos Kamerer

Koppers Industry

7540 NW St. Helens Rd. Portland, OR 97210-3663

Report Date: February 20, 1995

Job Number: 950216B

PO Number: Verbal - Amos Kamerer

Project No: None Provided Project Name: None Provided

#### **Analytical Narrative**

The samples were received on 02/16/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
950216B-1	WWT 1/3/5 Composite	Waste Water	02/16/95	0800
950216B-2	WWT 2/4 Composite	Waste Water	02/16/95	0800

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Norw/Unil

Rona A. Klueh Technical Director

RAK/atc



Koppers Industry

Job Number: 950216B Page Number: 2 of 3

Lab Sample ID: 950216B-1

Field ID: WWT 1/3/5 Composite

Date/Time: 02/16/95 0800 Matrix: Waste Water

EPA Category: Conventional Parameters

•		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	6.	mg/L	02/16/95	SSS
Total Phenols	EPA 420.1	0.05	0.09	mg/L	02/17/95	SVS



Koppers Industry

Job Number: 950216B Page Number: 3 of 3

Lab Sample ID: 950216B-2

Field ID: WWT 2/4 Composite

Date/Time: 02/16/95 0800 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	7.	mg/L	02/16/95	SSS
Total Phenols	EPA 420.1	0.05	0.07	mg/L	02/17/95	SVS

## RECEIVED

FEB 23 1995

KOPPERS INDS., INC. PORTLAND, OR

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#### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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# Koppers002662

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way

Portland, OR 97230 (503) 254-1794 FAX: (503) 254-1452 N OF CUSTODY AGREEMENT

PENDLETON BRANCH
287 SE First
Pendleton, OR 97801

(503) 276-0385

Report Attention: Amos Kamerer Company Name: Koppers Fnd, Inc. Address: 7540 NW St Halmo Rd	Project Name: Project Number: PO Number:		FOR LABORATORY USE ONLY Page of Job Number: \( \sqrt{1} \sqrt{1} \sqrt{1} \sqrt{2} \sqrt{1} \sqrt{2} \				
Portland OR 97210  Phone: (503) 286-368 FAX: (503) 285-2831  Report Instructions:	Sample Turnaround  Standard  Priority (1.5x Std. Fee)  Rush (2x Std. Fee)  Emergency (3x Std. Fee)	Reporting Request  FAX (T-35)  Verbals (T-1157)  Extra Report Copy (T-1402) (Fees Associated)  Initials:	Card #:  Cash / Check: \$  Billing Code: 1 2 3 4  OC LEVEL: 1 2 3 4  FEDX BUS COURIER UPS LAB CLIF	#:NT MAIL			
Sample ID  WWT 7,4,6 composi.	Loc. ID College / Date / 4-12-95	Time	Analysis Requested  Oil & Grease	Test/Profile			
	Relinquished by: (Please Sign)	Date Time	Received by: (Sign)  Date	Time			
White Copy - Laboratory Copy Yellow Copy - Client Copy SHADED AREAS FOR LABORATORY USE ONLY	Dan & Thigh	4/12/95 5:35 4/12/95 4:25	Fara 2716 14/12/93	000000000000000000000000000000000000000			

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

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**PROJECT NUMBER** - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

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COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINOUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

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#### APPLICABLE LAW.

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: April 18, 1995
Job Number: 950412BD
PO Number: Amos Kamerer
Project No: None Provided
Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210

#### **Analytical Narrative**

The sample was received on 04/12/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
950412BD-1	WWT 2,4,6 Composite	Waste Water	04/12/95	1535

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

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Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,
Novallul

Rona A. Klueh Technical Director

RAK/atc



Koppers Industry

Job Number: 950412BD

Page Number: 2 of 2

Lab Sample ID: 950412BD-1

Field ID: WWT 2,4,6 Composite

Date/Time: 04/12/95 1535 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	<u>Units</u>	Date	<u>Analyst</u>
Oil & Grease	EPA 413.1	3.	ND	mg/L	04/13/95	SSS
Total Phenols	EPA 420.1	0.05	0.10	mg/L	04/13/95	SVS

ND means none detected at or above the detection limit listed.

## **RECEIVED**

APR 2 1 1995

KOPPERS INDS., INC. PORTLAND, OR NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

117-191

Form Approved.

12-161

PERMITTEE NAME/ADDRESS (Include

Fecility Neme/Location if different)

HAME KOPPERS INDUSTRIES



Koppers Industry

Job Number: 950511BL Page Number: 2 of 2

Lab Sample ID: 950511BL-1

Field ID: W.W.T. 2,4,6 Date/Time: 05/11/95 1400 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	5.	mg/L	05/12/95	JAG
Total Phenols	EPA 420.1	0.05	ND	mg/L	05/12/95	SVS

EPA Category: Not Applicable

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Acenaphthene	EPA 8310	30.	ND	μg/L	05/16/95	DJM
Acenaphthylene	EPA 8310	30.	ND	μg/L	05/16/95	DJM
Anthracene	EPA 8310	10.	ND	μg/L	05/16/95	DJM
Benzo(a)anthracene	EPA 8310	1.	2.	$\mu$ g/L	05/16/95	DJM
Benzo(b)fluoranthene	EPA 8310	2.	4.	μg/L	05/16/95	DJM
Benzo(k)fluoranthene	EPA 8310	1.	2.	μg/L	05/16/95	DJM
Benzo(g,h,i)perylene	EPA 8310	3.	ND	μg/L	05/16/95	DJM
Benzo(a)pyrene	EPA 8310	1.5	2.	μg/L	05/16/95	DJM
Chrysene	EPA 8310	3.	ND	μg/L	05/16/95	DJM
Dibenzo(a,h)anthracene	EPA 8310	3.	ND	μg/L	05/16/95	DJM
Fluoranthene	EPA 8310	5.	ND	μg/L	05/16/95	DJM
Fluorene	EPA 8310	20.	ND	μg/L	05/16/95	DJM
Indeno(1,2,3-cd)pyrene	EPA 8310	3.	ND	μg/L	05/16/95	DJM
Naphthalene	EPA 8310	30.	ND	μg/L	05/16/95	DJM
Phenanthrene	EPA 8310	10.	ND	$\mu g/L$	05/16/95	DJM
Pyrene	EPA 8310	10.	ND	μg/L	05/16/95	DJM

ND means none detected at or above the detection limit listed.

## RECEIVED

MAY 18 1995 KOPPERS INDS., INC. PORTLAND, OR

#### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

	<del>                                     </del>	ı	ſ	r					Γ	1	<del></del>	γ	T	Γ
					MONTH	MAY	YEAR 92							
					FLOW									
	WWT-1	WWT-2	WWT-3	WWT-4	WWT-5	WWT-6	TOTAL		#DAYS IN		G.P.D.	-	-	<b></b>
GLS. PER TANK	45,000		45,000	45,000					MONTH		DISCHARG	E		
# OF PUMPINGS	<del>                                     </del>	7	<del></del>	<del></del>	<del>                                     </del>	7	6				<del>                                     </del>		<del> </del>	
GALS.PUMPED							220,000		3/		7097			
					SAMPLE C	ONCENTRA	TION LEVE	<u>.s</u>						
TEMPERATURES	60 62	<del> </del>			<del> </del>		1		<del></del>	<u> </u>	AVG.	MIN.	MAX.	UNIT
PH	6.4 6.6	<del> </del>	<del>  </del>				<del></del>				6.5	6.4	6,6	SU
OIL & GREASES	N.O 5.0					l					2.5	NO	5.0	MG/L
PHENOLS	105 N.O.										.03	ND	,05	MG/L
					QUARTERI	Y PAH TES	TING							
		DATE SAM	PLE TAKEN	5-111	1.95		RESULTS_	10						
		<u> </u>			l		(MUST BE LE	S THAN 1000	)					

5-11-95 wwt PH Temp 2,46 6.6

# Koppers002672

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Company Name: Kupper Co INC. Address: > 5040 N.W. SI Helens Rd  Portland Or. 97710-3663  Phone: 503, 286-3621 FAX: 603, 285-2831  Report Instructions:	Project Name: Project Number: PO Number:  Sample Standard Priority (1 Rush (2x St	Turnaround  5x Std. Fee)  td. Fee)	FAX Verba	eporting Re (T-35) als (T-1157) Report Cop s Associated	y (T-1402) )	FOR LABORATORY USE ONLY Job Number:	FORES  FINANCE  FINAN				
	Loc. I	Date /	ction Time	Media		Analysis Requested		Test/Profile			
W.W.T.2-4-6 COMPOSITE		5-11-95	2:00		DIX	Crease					
W. W. T. 2.4.6.					PHe	MOLS					
W.W.T. 2.4.6.					GLEAD	othy P. A. H.					
						,					
Sample Comments:						. 3.					
Sampled by: (Please Print)  Sampled by: (Please Print)  White Copy - Laboratory Copy  Yellow Copy - Client Copy  IL.	Relinquished by: (I	Please Sign)		195 30	ime	Received by: (Sign)	Date 5-11-99	Time 3/30			
SHADED AREAS FOR LABORATORY USE ONLY	rold fs. ble	files.	5-11-1	14 Wil	LAB	la a	Silir	101			

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

**REPORT ATTENTION** - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

PROJECT NAME -. Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

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JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

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#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Koppers Industry

Job Number: 950511BL Page Number: 2 of 2

Lab Sample ID: 950511BL-1

Field ID: W.W.T. 2,4,6 Date/Time: 05/11/95 1400 Matrix: Waste Water

EPA Category: Conventional Parameters

•		Detection	Analytical	•	Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	5.	mg/L	05/12/95	JAG
Total Phenols	EPA 420.1	0.05	ND	mg/L	05/12/95	SVS

EPA Category: Not Applicable

		Detection	Analytical		<b>Analysis</b>	
Parameter	Method	Limit	Result	Units	Date	<u>Analyst</u>
Acenaphthene	EPA 8310	30.	ND	μg/L	05/16/95	DJM
Acenaphthylene	EPA 8310	30.	ND	μg/L	05/16/95	DJM
Anthracene	EPA 8310	10.	ND ·	$\mu g/L$	05/16/95	DJM
Benzo(a)anthracene	EPA 8310	1.	2.	μg/L	05/16/95	DJM
Benzo(b)fluoranthene	EPA 8310	2.	4.	$\mu g/L$	05/16/95	DJM
Benzo(k)fluoranthene	EPA 8310	1.	2.	$\mu g/L$	05/16/95	DJM
Benzo(g,h,i)perylene	EPA 8310	3.	ND	μg/L	05/16/95	DJM
Benzo(a)pyrene	EPA 8310	1.5	2.	μg/L	05/16/95	DJM
Chrysene	EPA 8310	3.	ND	μg/L	05/16/95	$\mathbf{D}\mathbf{J}\mathbf{M}$
Dibenzo(a,h)anthracene	EPA 8310	<b>3.</b>	ND	μg/L	05/16/95	DJM
Fluoranthene	EPA 8310	5.	ND	μg/L	05/16/95	DJM
Fluorene	EPA 8310	20.	ND	μg/L	05/16/95	DJM
Indeno(1,2,3-cd)pyrene	EPA 8310	3.	ND	μg/L	05/16/95	DJM
Naphthalene	EPA 8310	30.	ND	μg/L	05/16/95	DJM
Phenanthrene	EPA 8310	10.	ND	μg/L	05/16/95	DJM
Pyrene	EPA 8310	10.	ND	μg/L	05/16/95	DJM

ND means none detected at or above the detection limit listed.



Report Date: May 16, 1995
Job Number: 950511BL
PO Number: None Provided
Project No: None Provided
Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210

#### **Analytical Narrative**

The sample was received on 05/11/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
950511BL-1	W.W.T. 2,4,6	Waste Water	05/11/95	1400

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc

5/1/95 composite wwT 1,3,5 temp 60°F pH 6.4

# Koppers002677

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH
287 SE First
Pendleton, OR 97801
(503) 276-0385

Report Attention: Amds Kamerer Company Name: Koppers Findustries Find Address: 7540 NW St Helens Road Portland, OR 97210 Phone: (508) 286 368 FAX: (503) 285-2831 Report Instructions:	JI !! ***	Reporting Request  FAX (T-35)  Verbals (T-1157)  Extra Report Copy (T-1402) (Fees Associated) Initials:	FOR LABORATURY USE ONLY  Job Number:  Custabbr:  VISA M/C Expires:  Card #:  Cash / Check: 5  Billing Code: 1 2 3 4  QC LEVEL: 1 2 3 4  FEDX BUS COURIER UPS LAB	of ONEW
Sample ID  WWT: 1-3-5 Composite  WWT 1-3-5 Composite	. S/1	lection / Time / Media / C	Analysis Requested  Penols	Test/Profile
Sample Comments:  Sampled by: (Please Print)  White Copy - Laboratory Copy Yellow Copy - Client Copy SHADED AREAS FOR LABORATORY USE ONLY	Relinquished Sign)  Oan 2 Why G	Date Time 5-1.993.4/2001 5/1/95 4:30 pm	Received by: (Sign)  Date of the second seco	1953:40

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

200

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

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**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - ... Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

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COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

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RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

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#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: May 5, 1995 Job Number: 950501AU

PO Number: PO Required if over \$500

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210

#### **Analytical Narrative**

The sample was received on 05/01/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel understrict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
950501AU-1	WWT 1-3-5 Composite	Waste Water	05/01/95	1530

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc



Koppers Industry

Job Number: 950501AU

Page Number: 2 of 2

Lab Sample ID: 950501AU-1

Field ID: WWT 1-3-5 Composite

Date/Time: 05/01/95 1530 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	05/02/95	SSS
Total Phenols	EPA 420.1	0.05	0.05	mg/L	05/03/95	SVS

ND means none detected at or above the detection limit listed.

## **RECEIVED**

MAY 0 9 1995

KOPPERS INDS., INC. PORTLAND, OR

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PERMITTEE NAME/ADDRESS (Incluse Facility Name/Location if different) MAMS KOPPERS INDUST ADDRESS 7540 NW ST. HE PORTLAND, OR	TRIES, INC.		1010	ARGE MO (2-16)		N SYSTEM (NPDES DRT (DMR) (17-19) )6	3077 <b>–3</b>	Form Appro OMB No. 20 Approval ex	40-00		
PAGILITY NORTHWEST PL		7430	FROM 95 (20-21)	06 01		MO DAY 06 30 (28-29) (30-31)	47430 NOTE: Read in		ons before completing this form.		
PARAMETER		(3 Card Only) Q (46-53)	UANTITY OR LOADIN (54-61)	10	(4 Card Only) (38-45)	QUALITY OR C (46-53)	ONCENTRATION (54-61)		NO.	FREQUENC OF ANALYSIS	SAMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMU	4 UNITS	(62-63)	(64-68)	(69-70)
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#### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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	WWT-1				WWT-5		TOTAL		#DAYS IN	G.P.D.			
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OIL & GREASES	6. 9.	<del>  </del>	<del>  </del>			<u> </u>	l		}} <u>}</u> -	8.	6,	9.	MG/L
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6/5/95. Composite 1-3-5 18.7°C pH 6.5 C66°F

# Koppers002685

PORTLAND BRANCH

#### COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

12423 NE Whitaker Way Portland, OR 97230 (503) 254-1794 FAX: (503) 254-1452

Attention: HMOS Kamever Company Name: Koppers Fullustries Fuc Address: 1540 XW St Helens Rd	Name: Project Number:		Job Number: 10 10 10 10 10 10 10 10 10 10 10 10 10	
Fort and OR 972 10  Phone: (503) 286-368 FAX: (503) 285-283 1  Report Instructions:	Sample Turnaround  Standard  Priority (1.5x Std. Fee)  Rush (2x Std. Fee)  Emergency (3x Std. Fee)	Reporting Request  FAX (T-35)  Verbals (T-1157)  Extra Report Copy (T-140 (Fees Associated)  Initials:	VISA   M/C Expires:	f:
Sample ID		lection Media / Time	Analysis Requested	Test/Profile
WWT 1-3-5	6/5/95	3:25 HCL (	Oil : Grease	
WWT 1-3-5	6/5/95	3:25 p CuPO4	Phonois	
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Sample ID	Loc. ID	Date / Time	Media	Analysis Requested	Test/Profile
WWT 1-3-5		6/5/95 3:254	HU	Oil & Grease	
WWT 1-3-5		6/5/95/3:250	CuPa	Phonols	
		, , , , , , , , , , , , , , , , , , ,	•		
Sample Comments:					

Sampled by: (Please Print)	Relinquished by: (Please Sign)	Date	Time	Received by: (Sign)	Date	Time
Dennis Stewart	Donnis Stewart	65-95	3:25	Karen I Mes	6/5/95	3:25
White Copy - Laboratory Copy Yellow Copy - Client Copy		6/ 95</th <th>4:50</th> <th></th> <th>1 (</th> <th>. 4</th>	4:50		1 (	. 4
SHADED AREAS FOR LABORATORY USE ONLY			,	INB MM (	10 5 47	160

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

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REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

PROJECT NAME - Applies to customer project name. This data is provided at the customer's discretion.

**PROJECT NUMBER** 7. Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE:- The date on which the sample(s) was/were collected.

**COLLECTION TIME** - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

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CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: June 9, 1995
Job Number: 950605AH
PO Number: Amos Kamerer
Project No: None Provided
Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210

#### **Analytical Narrative**

The sample was received on 06/05/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory			Collection	Collection
Sample ID	Field Identification	Matrix	Date	Time
950605AH-1	WWT 1-3-5	Waste Water	06/05/95	1525

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc



Koppers Industry

Job Number: 950605AH

Page Number: 2 of 2

Lab Sample ID: 950605AH-1

Field ID: WWT 1-3-5 Date/Time: 06/05/95 1525 Matrix: Waste Water

EPA Category: Conventional Parameters

Parameter		Detection Analytical			Analysis		
	Method	Limit	Result	Units	Date	Analyst	
Oil & Grease	EPA 413.1	3.	9.	mg/L	06/06/95	SSS	
Total Phenols	EPA 420.1	0.05	0.12	mg/L	06/07/95	SVS	

## **RECEIVED**

JUN 12 1995

KOPPERS INDS., INC. PORTLAND, OR

6/20/95. WWT Z-4-6 61° F

# Koppers002691

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: AMOS Kamerer Company Name: No Azer Ind  Address: 9540 Nw St. Helens R  Portland OR. 97210-3663  Phone: (503) 286-3681 FAX: (503) 285-24  Report Instructions:	Ø. PO!  31 □ S	ne:	d. Fee)	FAX (T-35)	1157) rt Copy (T-14 ociated)	Joh Number Custabbr:  VISA  Card #:  Cash / Che Billing Ced  QC LEVE	☐M/C Expires:		f:
Sample ID	L	oc. ID	Collection Date / Time	Ме	dia	Aı	nalysis Requested		Test/Profile
wwt 2,4,6 composite			6-20-9-8:	1)5		sild Grease			
wwt 2, 4, 6 composite			6-20-95 8:1	45	PI	renols			
Sampled by: (Please Print)		shed by: (Please		Date	Time	1 -	ved by: (Sign)	Date	Time
White Copy - Laboratory Copy Yellow Copy - Client Copy SHADED AREAS FOR LABORATORY USE ONLY	Brad Ha		Jeff 6	6-20-95 120/B)	9 Am 10:00 a		abush	6/20195	9:00am

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here:

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession,

RECEIVED BY:

The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

#### PRICING AND CHARGES

Prices to be charged for work performed for CLIENT are those currently published in the Coffey Laboratories, Inc. (CLI) standard pricebook. CLIENT must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. All submissions of samples with testing requirements to CLI will be understood to be an agreement for services. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

#### DELIVERY AND LIABILITY LIMITATIONS

CLI will analyze samples provided by CLIENT as requested by CLIENT in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP). The maximum total liability assumed by CLI for work performed for CLIENT will in all cases be limited to the cost of the analysis. The specific format of the deliverable goods will be defined by CLIENT to CLI upon transfer of the samples to CLI. This warranty supersedes all other warranties.

#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: June 26, 1995 Job Number: 950620J

PO Number: None Provided Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210

#### **Analytical Narrative**

The sample was received on 06/20/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
950620J-1	WWT 2,4,6 Composite	Waste Water	06/20/95	0845

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Kluen
Technical Director

RAK/atc



### **Analytical Data**

Koppers Industry

Job Number: 950620J

Page Number: 2 of 2

Lab Sample ID: 950620J-1

Field ID: WWT 2,4,6 Composite

Date/Time: 06/20/95 0845 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	6.	mg/L	06/20/95	SSS
Total Phenols	EPA 420.1	0.05	ND	mg/L	06/20/95	SVS

ND means none detected at or above the detection limit listed.

# **RECEIVED**

JUN 27 1995

KOPPERS INDS., INC. PORTLAND, OR

dity Name Location of Michael Include ME KOPPERS INDUSTRIES PORTLAND, OR 97210	S ROAD		10100 PERM	TNUMBER		07 DISCHARGE		3077-J 47430	Form Appro OMB No. 20 Approval ex	040-00		4	
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NO DISCHARGE DURING THE MONTH.

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Third quarter PAH test results are attached.

cc: W. E. Swearingen

8/4/95 80° V= PH 6.7 1-3-5

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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# Koppers002700

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Amos Kamerer Company Name: Koppers Industries: Address: 7540 NW St Helens Portland OR 972	Rd P01	e: ect ber: Number: Sample Turn	around	F FAX	Reporting Ro	equest	FOR LARORATORY USE ONLY  Job Number: WG955804 - JS4  Custabor: G955804 - JS4  Custabor: G956804 - JS4  Custabor: G9768 - G9868  Custabor: G9768 - G9868  Custabor: G9768 - G9768  Custabor: G9768 - G9768  Custabor: G9768 - G9768  Custabor: G9768 - G9768  Custabor: G9768 - G9768  Custabor: G9768 - G9768 - G9768  Custabor: G9768 - G9768				
Phone: (SV3) 286-3681 FAX: (SV3) 285-6	1 C	Standard  Priority (1.5x Std. Fee)  Rush (2x Std. Fee)  Emergency (3x Std. Fee)			als (T-1157)  Report Copes Associated	ру (Т-1402)	Cash / Check: Billing Code: QC LEVEL:				
Sample ID  WWT 1-3-5  WWT 1-3-5  WWT 1-3-5		10 12 11 10	Collec Date / 8 14 195 8 14 195	Time	Media CuPOy HCL Raked		Phenols	sis Requested  Grease		Test/Profile	
Sample Comments:  Sampled by: (Please Print)  By acl Halu care  White Copy - Laboratory Copy Yellow Copy - Client Copy  SHADED AREAS FOR LABORATORY USE ONLY  SUBMISSION OF SAMPLES WITH TE  SERVICES IN ACCORDANCE WITH	3 rac 26	u /// QUIREMA	2 Ints to		9 2 9 4 WIEL B	2001 -	Kan J Muse RSTOOD TO		Date	Time  200 p	

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

**REPORT ATTENTION** - Name of the person who receives the laboratory report.

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REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

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**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

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RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

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#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: August 14, 1995

Job Number: 950804BK

PO Number: Verbal - Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 08/04/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel understrict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
950804BK-1	WWT 1-3-5	Waste Water	08/04/95	1400

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc

RECEIVED

AUG 17 1995 KOPPERS INDS., INC.



## **Analytical Data**

Koppers Industry

Job Number: 950804BK

Page Number: 2 of 2

Lab Sample ID: 950804BK-1 Field ID: WWT 1-3-5 Date/Time: 08/04/95 1400

Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
<u>Parameter</u>	Method	Limit	Result	Units	Date	<b>Analyst</b>
Oil & Grease	EPA 413.1	3.	ND	mg/L	08/11/95	SSS
Total Phenols	EPA 420.1	0.05	ND	mg/L	08/09/95	PDB

EPA Category: Extractable Organics

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Acenaphthene	EPA 8310	25.	ND	$\mu g/L$	08/09/95	DJM
Acenaphthylene	EPA 8310	25.	ND	$\mu \mathrm{g}/\mathrm{L}$	08/09/95	DJM
Anthracene	EPA 8310	5.	ND	$\mu g/L$	08/09/95	DJM
Benzo(a)anthracene	EPA 8310	0.25	ND	$\mu g/L$	08/09/95	DJM
Benzo(b)fluoranthene	EPA 8310	0.5	ND	μg/L	08/09/95	DJM
Benzo(k)fluoranthene	EPA 8310	0.25	ND	$\mu g/L$	08/09/95	DJM
Benzo(g,h,i)perylene	EPA 8310	0.5	ND	$\mu g/L$	08/09/95	DJM
Benzo(a)pyrene	EPA 8310	0.25	ND	μg/L	08/09/95	DJM
Chrysene	EPA 8310	2.5	ND	μg/L	08/09/95	DJM
Dibenzo(a,h)anthracene	EPA 8310	0.5	ND ·	μg/L	08/09/95	DJM
Fluoranthene	EPA 8310	2.5	ND	$\mu g/L$	08/09/95	DJM
Fluorene	EPA 8310	2.5	ND	μg/L	08/09/95	DJM
Indeno(1,2,3-cd)pyrene	EPA 8310	1.25	ND	μg/L	08/09/95	DJM
Naphthalene	EPA 8310	25.	ND	μg/L	08/09/95	DJM
Phenanthrene	EPA 8310	5.	ND	μg/L	08/09/95	DJM
Pyrene	EPA 8310	2.5	ND	$\mu g/L$	08/09/95	DJM

ND means none detected at or above the detection limit listed.

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TION Multnomah Cour			FROM	95 O	9 01		95	09	30	T.					
			·	(20-21) (22	2-23) (24-2	25)	(26-27)	(28-29)	(30-31)	NOTE: Read in	structio	ns befo	re com	pleting th	is form
PARAMETER		(3 Card Only) (46-53)	UANTITY OR (54-6)			(4 Card ( 38-		QUAI	(46-53)	CONCENTRATION (54-61)			NO.	FREQUENC OF ANALYSIS	SAN
(32-37)		AVERAGE	MAXII	MUM 1	UNITS	MIN	IMUM		AVERAGE	MAXIMUM	4	UNITS	(62-63)	1	(69
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Amended Report Date: October 13, 1995

Job Number: 950925P

PO Number: Verbal - Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 09/25/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
950925P-1	WWT 2,4,6 Comp.	Waste Water	09/25/95	0800

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh

Technical Director

RAK/atc

RECEIVED

OCT 17 1995

KOPPERS INDS., INC. PORTLAND, OR

**COFFEY LABORATORIES, INC.** 

12423 N.E. Whitaker Way ● Portland, OR ● 97230 ● (503) 254-1794 ● FAX (503) 254-1452



### **Analytical Data**

Koppers Industry

Job Number: 950925P

Page Number: 2 of 2

Lab Sample ID: 950925P-1

Field ID: WWT 2,4,6 Comp. Date/Time: 09/25/95 0800

Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	<u>Analyst</u>
Oil & Grease*	EPA 413.1	3.	ND	mg/L	09/26/95	JAG
Total Phenols	EPA 420.1	0.05	ND	mg/L	09/26/95	PDB

ND means none detected at or above the detection limit listed.

\* Note: Estimated Oil & Grease concentration ≈1.4 mg/L.

9-25-95 wwt: 2,4,6, PN Templ comp. 6-3

# Koppers002708

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230

(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Amos Kamever Company Name: Koppers Industries I Address: 7540 NW St Helans Roc POrtland OR 97210 Phone: (503) 286-368) FAX: (503) 285-28 Report Instructions:	31 PO N	e: ect	d. Fee) ee)	FAX Verba	als (T-115	57) Copy (T-1402 ted)	Job Number: 1  Custabbr: 1  VISA M/C  Card #:  Cash / Check: 5  Billing Code: 1  QC LEVEL: 1	Billing Code: 1 2 3 4  QC LEVEL: 1 2 3 4			
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SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

**REPORT ATTENTION** - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - ... Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

#### PRICING AND CHARGES

Prices to be charged for work performed for CLIENT are those currently published in the Coffey Laboratories, Inc. (CLI) standard pricebook. CLIENT must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. All submissions of samples with testing requirements to CLI will be understood to be an agreement for services. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

#### DELIVERY AND LIABILITY LIMITATIONS.

CLI will analyze samples provided by CLIENT as requested by CLIENT in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP). The maximum total liability assumed by CLI for work performed for CLIENT will in all cases be limited to the cost of the analysis. The specific format of the deliverable goods will be defined by CLIENT to CLI upon transfer of the samples to CLI. This warranty supersedes all other warranties.

#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

### MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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Report Date: October 30, 1995

Job Number: 951026L

PO Number: Amos Kamerer Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 10/26/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix <sub>.</sub>	Collection Date	Collection Time
951026L-1	WWT 2,4,6-Composite	Waste Water	10/26/95	1015

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

RECEIVED

1197 - 1 1995

KOPPERS INDS., INC. PORTLAND, OR Sincerely,
Amel (Aml

Rona A. Klueh Technical Director

RAK/atc



## **Analytical Data**

Koppers Industry

Job Number: 951026L

Page Number: 2 of 2

Lab Sample ID: 951026L-1

Field ID: WWT 2,4,6-Composite

Date/Time: 10/26/95 1015 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	10/26/95	JAG
Total Phenols	EPA 420.1	0.05	ND	mg/L	10/27/95	PDB

ND means none detected at or above the detection limit listed.

10/26/95 WWT 2.4.6 58° F

# Koppers002716

PORTLAND BRANCH

12423 NE Whitaker Way

(503) 254-1794 FAX: (503) 254-1452

Portland, OR 97230

COFFEY LABORATORIES, INC.

CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Amos Kamener Company Name: Koppers Inclustries Inc Address: 7540 NW St Helens Pood Portland OR 97210 Phone: (503) 286-3681 FAX: (503) 285-2861 Report Instructions:	Standa	er:nple Turnaround	☐ FAX	pals (T-1157) a Report Cop es Associated	y (T-1402)	FOR LABORATORY USE ONL.  Job Number: 11/6 957  Custabbr: KGDDEAL  VISA M/C Expires:  Card #:  Cash / Chick: 5  Billing Code: 1 2 3  QC LEVEL: 1 2 3  FEDX BUS COURIER U	0264	□ NEW
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SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

**RELINQUISHED BY** - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession.

**RECEIVED BY** - The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

#### PRICING AND CHARGES

Prices to be charged for work performed for CLIENT are those currently published in the Coffey Laboratories, Inc. (CLI) standard pricebook. CLIENT must notify CLI of price quotation at the time of the transfer of sample(s) to CLI. All submissions of samples with testing requirements to CLI will be understood to be an agreement for services. Any cancellation of testing requirements will result in charges being assessed on all testing completed prior to the notice of cancellation.

#### **DELIVERY AND LIABILITY LIMITATIONS**

CLI will analyze samples provided by CLIENT as requested by CLIENT in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP). The maximum total liability assumed by CLI for work performed for CLIENT will in all cases be limited to the cost of the analysis. The specific format of the deliverable goods will be defined by CLIENT to CLI upon transfer of the samples to CLI. This warranty supersedes all other warranties.

#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: October 17, 1995

Job Number: 951013E

PO Number: Verbal - Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 10/13/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
951013E-1	1,3,5 WWT Comp	Waste Water	10/13/95	0945

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Novel Unl

Rona A. Klueh Technical Director

RAK/atc

RECEIVED

OCT 20 1995

KOPPERS INDS., INC. PORTLAND, OR



## **Analytical Data**

Koppers Industry

Job Number: 951013E Page Number: 2 of 2

Lab Sample ID: 951013E-1

Field ID: 1,3,5 WWT Comp Date/Time: 10/13/95 0945 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	<u>Limit</u>	Result	<u>Units</u>	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	10/13/95	JAG
Total Phenols	EPA 420.1	0.05	ND	mg/L	10/16/95	PDB

ND means none detected at or above the detection limit listed.

# Koppers002721

PORTLAND BRANCH

12423 NE Whitaker Way

(503) 254-1794 FAX: (503) 254-1452

Portland, OR 97230

## COFFEY LABORATORIES, INC.

# CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: AMDS KaMerer  Company Name: KOPPERS F. Nd.  Address: 7540 IV W ST. Helens R.D.  Portland OR. 97210-3663  Phone: (503) 286-3681 FAX: (503) 285-1831  Report Instructions:	Sample Turna	FA Fee) Uest	Reporting Reques X (T-35) bals (T-1157) ra Report Copy (T- ees Associated)	Card #: Cash / Check: \$	2/3 E	ONEW
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1,3,5 wwt comp		10-13-95 9 45 AM	V	Phenols		
Sample Comments:						
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SHADED AREAS FOR LABORATORY USE ONLY				LAB WHEAU	10-17-95	1100

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

## COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

#### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

REPORT ATTENTION - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

PROJECT NUMBER - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE : The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.)

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

#### CONDITIONS

#### PRICING AND CHARGES

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#### DELIVERY AND LIABILITY LIMITATIONS

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#### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: October 13, 1995

Job Number: 951011AI

PO Number: Verbal - Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

#### **Analytical Narrative**

The sample was received on 10/11/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
951011AI-1	WWT 2-4-6 Composite	Waste Water	10/11/95	1115

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc

RECEIVED

OCT 18 1995 KOPPERS INDS., INC. PORTLAND, OR



## **Analytical Data**

Koppers Industry

Job Number: 951011AI

Page Number: 2 of 2

Lab Sample ID: 951011AI-1

Field ID: WWT 2-4-6 Composite

Date/Time: 10/11/95 1115 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection Analytical			Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	10/11/95	JAG
Total Phenols	EPA 420.1	0.05	ND	mg/L	10/12/95	PDB

ND means none detected at or above the detection limit listed.

10/11/95 WWT 2-4-60 591pH 6.4

# Koppers002726

COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

Report Attention: Amos Kamer er Company Name: Koppers Industries In Address: 7540 NW St Helens R Portland OR 97210 Phone: (503) 286-3681 FAX: (503) 285-283 Report Instructions:	PO Number: Sample Turn	☐ FAX ( d. Fee) ☐ Verbal le) ☐ lxtra F Fees		FOR LABORATORY USE ONLY Job Number:	Page of NEW
Sample ID  WWT 2-4-6 Compos  WWT 2-4-6 Compos		Collection Date / Time 10/11/95 11/5 and 10/11/9	Media	Analysis Requested  Phenols  Oil 4, Greare	CLIENT MAIL.  Test/Profile
Sample Comments:  Sampled by: (Please Print)  T. T. L. L. L. L. C. White Copy - Laboratory Copy Yellow Copy - Client Copy SHADED AREAS FOR LABORATORY USE ONLY	Relinquished by: (Please	may 1493	Time  1/45 AM  1:12 PM	Kleen J My 10/1	Date Time 1/1/95 1/1/5 and
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SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CIVILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON 2 BACK OF THE CLIENT COPY.

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COLLECTION TIME -

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MEDIA -

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### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: October 6, 1995 Job Number: 951003BH PO Number: Amos Kamerer Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

# **Analytical Narrative**

The sample was received on 10/03/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
951003BH-1	WWTs 1,3,5 Composite	Waste Water	10/03/95	1345

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc

RECEIVED

OCT 10 1995

KOPPERS INDS., INC. PORTLAND, OR



# **Analytical Data**

Koppers Industry

Job Number: 951003BH Page Number: 2 of 2

Lab Sample ID: 951003BH-1

Field ID: WWTs 1,3,5 Composite

Date/Time: 10/03/95 1345 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	10/04/95	JAG
Total Phenols	EPA 420.1	0.05	ND	mg/L	10/04/95	PDB

ND means none detected at or above the detection limit listed.

# oppers002730

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
12423 NE Whitaker Way
Portland, OR 97230
(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Amos Kamerer Company Name: Koppers Industries In Address: 1540 NW St Helens Re Portland OR 97210  Phone: (503) 286-368) FAX: (503) 285-28  Report Instructions:	31_	Standa	mple Turn ard ty (1.5x St	d. Fee) ee)	☐ FAX	als (T-1157 a Report Co	) py (T-1402)	Joh Number:  Custabbr:  VISA MA  Card #:  Cash / Check: 5  Billing Code:	C Expires:		i .
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wwT's 1, 3, 5 ComP  Sample Comments:				10-3-95	1 45 1 Fm		Ph	enol's			
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White Copy - Laboratory Copy Yellow Copy - Client Copy SHADED AREAS FOR LABORATORY USE ONLY	Ka	en Z	N				Som	• 100 A		11/2/45	7

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

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Facility Northwest Plant LOCATION MULTINOMAL Country  Permittee Name/Location if different/ NAME Koppers Industries  ADDRESS 7540 NW St Hele  Portland, OR 97210  PACILITY Northwest Plant LOCATION Multnomah Country	ns Road 0	 		<u>.</u>	101003 PERMI	ARGE MOI (2·16)	TORING	DISCH	(17-19) 12 Arge Humber	3077-J 47430	,	Form Appro DMB No. 20 Approval ex	040-00 pires	10-31-94	s form.
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

4th Quarter PAH test res**p**lts are attached.



# **Analytical Data**

Koppers Industry

Job Number: 951211AO

Page Number: 4 of 4

Lab Sample ID: 951211AO-2

Field ID: WWT 1-3-5 Date/Time: 12/11/95 1430 Matrix: Waste Water

EPA Category: Extractable Organics

Analysis Performed: EPA 8310; Polynuclear Aromatic Hydrocarbons by HPLC.

Analysis Date: 12/13/95 Analyst: DJM

	Detection	Laboratory	Analytical
Parameter	<u>Limit</u>	Blank	Result
Acenaphthene	150.	ND	ND
Acenaphthylene	150.	ND	ND
Anthracene	30.	ND	ND
Benzo(a)anthracene	1.5	ND	7.
Benzo(b)fluoranthene	1.5	ND	9.
Benzo(k)fluoranthene	0.75	ND	5.7
Benzo(g,h,i)perylene	4.5	ND	ND
Benzo(a)pyrene	1.5	ND	12.
Chrysene	15.	ND	ND
Dibenzo(a,h)anthracene	4.5	ND	ND
Fluoranthene	15.	ND	ND
Fluorene	60.	ND	ND
Indeno(1,2,3-cd)pyrene	7.5	ND	ND
Naphthalene	150.	ND	ND
Phenanthrene	40.	ND	ND
Pyrene	30.	ND	ND

Results expressed as  $\mu g/l$  unless otherwise noted.

ND means none detected at or above the detection limit listed.



Report Date: December 30, 1995

Job Number: 951227L

PO Number: Verbal-Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

# **Analytical Narrative**

The sample was received on 12/27/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
951227L-1	WWT 1-3-5	Waste Water	12/27/95	1100

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

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Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh

Technical Director

RAK/atc

RECEIVED

JAN - 3 1995

KOPPERS INDS., INC. PORTLAND, OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452



# **Analytical Data**

Koppers Industry

Job Number: 951227L

Page Number: 2 of 2

Lab Sample ID: 951227L-1

Field ID: WWT 1-3-5 Date/Time: 12/27/95 1100 Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	12/27/95	AB
Total Phenols	EPA 420.1	0.05	0.19	mg/L	12/28/95	PDB

ND means none detected at or above the detection limit listed.

12/27/95 WWT pH 6.4 42°F

# Koppers002737

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTAND BRANCH
12423 E Whitaker Way
Portlad, OR 97230
(503)254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Amos Kamerer Company Name: Koppen Industries Inc Address: 7540 NW Stitelens Rd Portland OR 97210 Phone: (503) 286-368) FAX: (503) 285-2831 Report Instructions:	Project Name: Project Number:  PO Number:  Sample Turnaround  Standard  Priority (1.5x Std. Fee)  Rush (2x Std. Fee)  Emergency (3x Std. Fee)	Reporting Request  FAX (T-35)  Verbals (T-1157)  Extra Report Copy (T- (Fees Associated)  Initials:	Custabbr: CDDOD  VISA M/C Expares:  Card #:  Cash / Check: \$	2272 -/ ENEW
Sample ID	Loc. ID Co	ollection Media / Time	Analysis Requested	Test/Profile
WWT 1-3-5	12/27/	351/am WW	Phonoes	
WWT 1-3-5		Han V	026	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
5				
Sample Comments:				l l
Sampled by: (Please Print)  Brad Hawood Bin	Relinquished by: (Please Sign)	Date Time	Received by: (Sign)  Anon J. M.	Date Time 12/27/3) 1/:01)
White Copy - Laboratory Copy Yellow Copy - Client Copy	Lan INVI	12/2/13 11:50	LAB With A xia	12-27-95 1150

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1.32 No. 1

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## APPLICABLE LAW

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Report Date: December 14, 1995

Job Number: 951211AO

PO Number: Amos Kamerer-Verbal

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

# Analytical Narrative

The samples were received on 12/11/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory Sample ID	Field Identification	Matrix	Collection Date	Collection Time
951211AO-1	WWT 2-4-6	Waste Water	12/11/95	1430
951211AO-2	WWT 1-3-5	Waste Water	12/11/95	1430

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RAK/atc

RECEIVED
DEC 2 0 1995

KOPPERS INDS., INC. PORTLAND, OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452



# **Analytical Data**

Koppers Industry

Job Number: 951211AO

Page Number: 2 of 4

Lab Sample ID: 951211AO-1

Field ID: WWT 2-4-6
Date/Time: 12/11/95 1430
Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		<b>Analysis</b>	
Parameter	Method	Limit	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	12/12/95	AB
Total Phenois	EPA 420.1	0.05	0.10	mg/L	12/12/95	PDB

ND means none detected at or above the detection limit listed.



# **Analytical Data**

Koppers Industry

Job Number: 951211AO

Page Number: 3 of 4

Lab Sample ID: 951211AO-2

Field ID: WWT 1-3-5
Date/Time: 12/11/95 1430
Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	<u>Limit</u>	Result	Units	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	12/12/95	AB
Total Phenols	EPA 420.1	0.05	0.15	mg/L	12/12/95	PDB

ND means none detected at or above the detection limit listed.

12/11/95 WWT 1-3-5 PH 6.3 50°F 12/11/95 WWT 2-4-6 54°F pH 6.4

# Koppers002744

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY AGREEMENT

PORTLAND BRANCH
CHAIN OF
12423 NE Whitaker Way
Portland, OR 97230

(503) 254-1794 FAX: (503) 254-1452

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

Report Attention: Amos Kamenen	Project Name: FOR LABORATOR	Y USE ONLY Page of
Company Koppers Industries The		95/2// AT
Address: 7540 NW St Helens Rd	PO Number:	□NEW
Portland, 02 9.7210	Sample Turnaround Reporting Request	xpires:
Phone: (503) 286-368 FAX: 285-2831	☐ Standard ☐ FAX (T-35) Card #:	
Report Instructions:	Priority (1.5x Std. Fee)	#:#:
	Rush (2x Std. Fee)  Extra Report Copy (T-1402)  Billing Cede: 1	2 3 4
	(Fees Associated) QC LEVEL: 1	2 3 4
	Emergency (3x Std. Fee) Initials:FEDX BUS CO	OURIER UPS LAB CLIENT MAIL
Sample ID	Loc. ID Collection Media Analysis Re	quested Test/Profile
WWT 2-4-6	12/11/952:30 CuPO4 Phonols	
WWT 2-4-6	12/11/95/2:30 HCl 01/2 Grease	,
WWT 1-3-5	12/11/95 2=30 CuPO4 Phenols	
1000		
WWT 1-3-5	12/11/95 2:30 HC Dil 3 Grec	ye
WWT 1-3.5	12/11/1/2-30 Baked PAIT	
$\frac{\omega}{\omega}$	10111113 C-20 TAREA F 11 (1	
Sample Comments:		
Sampled by: (Please Print)	elinguished by: (Please Sign) Date Time // Received by: (	Sign) Date Time
	Harchteg 12/11/95/2:30 //www.dh	12-11-75 230
White Copy - Laboratory Copy Yellow Copy - Client Copy		- 1000
SHADED AREAS FOR LABORATORY USE ONLY	LAB (V)	10/190/07

SUBMISSION OF SAMPLES WITH TESTING REQUIREMENTS TO CLI WILL BE UNDERSTOOD TO BE AN AGREEMENT FOR SERVICES IN ACCORDANCE WITH THE CONDITIONS LISTED ON THE BACK OF THE CLIENT COPY.

# COFFEY LABORATORIES, INC. CHAIN OF CUSTODY INSTRUCTIONS/CONDITIONS SHEET

### INSTRUCTIONS

FOR LAB USE ONLY - All shaded areas are for laboratory use only. Please Do Not Write in These Areas.

**REPORT ATTENTION** - Name of the person who receives the laboratory report.

COMPANY NAME - Name of the company or individual requesting the analysis.

REPORT ADDRESS - Address of the company or individual requesting the analysis. (Address where report should be mailed)

REPORT INSTRUCTIONS - A brief description of any special mail instructions, or address information pertaining to extra report

copies.

**PROJECT NAME** - Applies to customer project name. This data is provided at the customer's discretion.

**PROJECT NUMBER** - Applies only to samples submitted by the customer. This data is provided at the customer's discretion.

FIELD ID - A short description of the sample point (e.g., "Effluent from sand filter"). This description will

appear on the report.

COLLECTION DATE - The date on which the sample(s) was/were collected.

COLLECTION TIME - The time at which the sample(s) was/were collected.

MEDIA - This is a description of the sample media (e.g., drinking water, waste water, soil, etc.) →

ANALYSIS REQUESTED - Use one line for each analysis or group of analyses associated to a specific bottle.

SAMPLE COLLECTED BY - The person who collected the sample(s) signs here.

RELINQUISHED BY - The sampler signs this box when he/she gives the sample to someone else, and then fills in the

date/time the sample left his/her possession.

RECEIVED BY - The person who receives the sample(s) signs here and fills in the date/time received. The date and

time should be same as "Relinquished by" unless the sample(s) was/were shipped.

JOB OR SAMPLE REMARKS - General sample or job remarks.

### CONDITIONS

# PRICING AND CHARGES

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### DELIVERY AND LIABILITY LIMITATIONS

CLI will analyze samples provided by CLIENT as requested by CLIENT in accordance with the procedures documented in the CLI Quality Assurance Plan (QAP). The maximum total liability assumed by CLI for work performed for CLIENT will in all cases be limited to the cost of the analysis. The specific format of the deliverable goods will be defined by CLIENT to CLI upon transfer of the samples to CLI. This watranty supersedes all other warranties.

### CONFIDENTIALITY

CLI will use its best efforts to treat all information regarding work performed for CLIENT as proprietary and confidential to the maximum extent allowed by law. NO CLIENT information will be released without the written consent of the CLIENT billed for the work.

#### APPLICABLE LAW

Legal matters arising from work performed by CLI for CLIENT will be construed and interpreted in accordance with the laws for the state of Oregon.



Report Date: December 6, 1995

Job Number: 951204BH

PO Number: Verbal-Amos Kamerer

Project No: None Provided Project Name: None Provided

Amos Kamerer Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210-3663

# **Analytical Narrative**

The sample was received on 12/04/95 by Coffey Laboratories, Inc. (CLI) Sample Reception personnel under strict chain of custody protocol. The following information was provided at the time of sample reception:

Laboratory			Collection	Collection
Sample ID	Field Identification	Matrix	Date	Time
951204BH-1	WWT 2,4,6 Comp.	Waste Water	12/04/95	1415

The recommended holding time for each batch of analyses was in accordance with the data quality objectives as specified in the CLI Quality Assurance Plan unless otherwise noted.

Acceptable precision and accuracy were achieved for all analyses associated with this work order as demonstrated by the recoveries of the quality control samples analyzed concurrently with each batch.

The data submitted in this report is for the sole and exclusive use of the above-named client. All samples associated with the work order will be retained a maximum of 15 days from the report date or until the maximum holding time expires. All results pertain only to samples submitted.

Thank you for allowing Coffey Laboratories to be of service to you. If you have questions or need further assistance, please do not hesitate to call our Customer Services Department.

Sincerely,

Rona A. Klueh Technical Director

RAK/atc

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DEC 11 1995

KOPPERS INDS., INC. PORTLAND, OR

Coffey Laboratories, Inc.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452



# **Analytical Data**

Koppers Industry

Job Number: 951204BH

Page Number: 2 of 2

Lab Sample ID: 951204BH-1

Field ID: WWT 2,4,6 Comp. Date/Time: 12/04/95 1415
Matrix: Waste Water

EPA Category: Conventional Parameters

		Detection	Analytical		Analysis	
Parameter	Method	Limit	Result	<u>Units</u>	Date	Analyst
Oil & Grease	EPA 413.1	3.	ND	mg/L	12/05/95	AB
Total Phenols	EPA 420.1	0.05	ND	mg/L	12/05/95	PDB

ND means none detected at or above the detection limit listed.

12/4/95 51.F pH 6.4 ww 2-4-6

# Koppers002749

PORTLAND BRANCH

12423 NE Whitaker Way

(503) 254-1794 FAX: (503) 254-1452

Portland, OR 97230

COFFEY LABORATORIES, INC.
CHAIN OF CUSTODY AGREEMENT

PENDLETON BRANCH 287 SE First Pendleton, OR 97801 (503) 276-0385

									ž ·	
Report Attention: Amos Kamener Company Name: Koppen Endustries F Address: 7540 NW St Helens F	2d	Project Name: Project Number: PO Numb						FOR LABORATORY USE Of Job Number: 75/. Custabbr:	204BC	
Portland OR 9721	10	Sa	mple Turi	naround		Reporting Re	equest	□VISA □M/C Expires: _		
Phone: (503) 286 3681 FAX: (503) 285 285	31_	☐ Stand	ard		☐ FAX	κ (T-35)		Card #:		
Report Instructions:		☐ Priori	ty (1.5x S	td. Fee)	☐ Veri	bals (T-1157)		Cash / Check: \$		#:
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# MONTHLY NPDES DISCHARGE REPORT WORK SHEET

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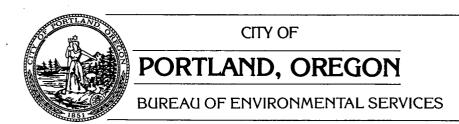


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Earl Blumenauer, Commissioner John Lang, Administrator 1120 S.W. 5th, Rm. 400 Portland, Oregon 97204-1972 (503) 796-7740 FAX: (503) 796-6995

August 29, 1990

Mr. John Oxford Koppers Industries 7540 NW St. Hellens Rd. Portland, Or. 97210

Dear Mr. Oxford:

I would like to extend my thanks for your cooperation during my visit to your business on August 24, 1990. During the inspection your facility appeared very clean and organized, I did not noticed any industrial waste being discharged into the City sewer system. I am enclosing a Facility Inspection Follow-up in which indicates the status of your company with The Industrial Wastewater Section. If you have any further questions please call me at; 796-7568

Sincerely,

Miguel A. Santana

Industrial Wastewater Technician

cc Harry Edmonds Tom Bottenberg file

Enclosure

# RECEIVED

AUG 3 1 1990

KOPPERS INDS., INC. PORTLAND, OR

Engineering Bill Gaffi 796-7181 Business Operations Bob Rieck 796-7133 Wastewater Treatment Ross Peterson 285-0205 Customer/Employee Affairs Karen Kramer 796-7062 August 29, 1990

Mr. John Oxford Koppers Industries 7540 NW St. Hellens Rd. Portland, Or. 97210

Dear Mr. Oxford:

The City of Portland, Industrial Waste section has recently completed an inspection of your facility. After review of your completed survey and site inspection report your industrial classification is listed below:

FACILITY:		WASTE DISCHARGE:
Categorical Industrial U	Jser (CIU)	X Sanitary Only
Significant Industrial U	Jser (SIU)	Sanitary & Process
$\ensuremath{XX}$ General Industrial User $\ensuremath{LI}$		Sanitary & Pretreated Process
Other (see any attached	sheet)	Other (see any attached sheet)
INDUSTRIAL WASTE DISCHARGE	PERMIT:	•
Required	[X Not Requir	red

Thank you for your cooperation with the City of Portland in the implementation of our Industrial Pretreatment Program. If you have any questions about the City's Industrial Monitoring Program please call me at: 796-7568.

Sincerely,

Miguel A. Santana

Industrial Wastewater Technician

cc. HGE

TEB

file



DOC ID: a \clom\form\log\fax.log Rovision #: 1.01 Rovision Date: April 30, 1992

# FACSIMILE TRANSMITTAL LOG

TO: Company Name:	pperson	Date: 3/25/	<u>E3</u>
Attention:	1/Xtord		
Phone #: ()	2-85-2831		
of Pages (Including Co	ver Sheets):		
9			
TELECOPIER PHONE #: (503	) 254-1452 CONFIRMA	FION PHONE #: (503)	254-1794
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COFFEY LABORATORIES, INC

2423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-14\$2

SAL TATOON MANOT ON CO. 1021

Doc. ID: 8310.FOR Volume: Section: Revision #: 100 Date: January 28, 19

Analysis Requested: Polynuclear Aromatic Hydrocarbons in Wall by EPA Method 8310, HPLC.

Client: Koppers

Job # WC 930302 AY 3

Analyst: Mills Report Date: 3/26/93

Date Analyzed: 3/26/93 Date Extracted: 3/8/93

Logbook Reference: Log 346 p. 30 Reviewed

Prep.Info/Comments:

Units:

P.A.H. T-1

COMPOUND	DETECTION LIMIT	LABORATORY BLANK	A43		
Acenaphthene	(0		ND		
Acenaphthylene	10	,			- the
Anthracene	0.1		4		
Benzo(a) anthracene	110		7,2		
Benzo(b)fluoranthene	2,0		ND		
Benzo(k)fluoranthene	210	}	1		
Benzo(g,h,i)perylene	4,0				
Benzo(a)pyrene	20		6,3		
Chrysene	1,0	·	120	(0)	
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Fluoranthene	210		12,5		
Fluorene	2,0		570	N)	. A.
Indeno(1,2,3-cd)pyrene	4,0		ND		
Naphthalene	6,8		V		
Phenanthrene	2,0		15,0		
Pyrene	4,0		11.8		



Patintoffey Jole File

John Oxford Koppers Industry 7540 NW St. Helens Rd. Portland, OR 97210 January 14, 1993 Document ID Q30114A.RDR Profile # 1137 Custabbr Koppers

ATTENTION: John Oxford

SUBJECT: Price Quotation for Quarterly Analyses

As per your request, Coffey Laboratories is pleased to submit the following price quotation for your consideration. This price quote is a confirmation of our telephone conversation in December. Please call us prior to your sampling so that we can provide the special bottles required for th PAH test.

Koppers: Quarterly Test	Price
Phenols: Total Phenols by 4AAP Distillation	\$28.00
Oil and Grease: by Infrared Spectroscopy	\$29.00
Org: PAH EPA 8310; Aqueous Matrix	\$180.00
Total	\$237.00

Please feel free to call our Customer Services Department should you have any questions.

Sincerely,

Richard D. Reid

Cust Services/Marketing Mgr

1/21/93 Post-It™ brand fax transmittal r	nemo 7671 # of pages > /
Post-It brand lax transmiss	From John Dyoul
Co. K-1800	co. Portland
Dept.	Phone #
Fax #	Fax#

# RECEIVED

JAN 19 1993

KOPPERS INDS., INC. PORTLAND, OR



Report Date: January 5, 1993

Job#: WG-921230AG-2

PO#: VERBAL JOHN (O&G/Phenols

Project#: None Project: None

Attention: John Oxford

Koppers Industry

7540 NW St. Helens Rd.

Portland, OR 97210

SAMPLE INFORMATION:

Date Samples Were Received By Laboratory: 12/30/92

Lab No.	Field Identification	Sample Matrix	Date	Time
1	WW TK #3	Waste Water	12-30-92	1400
2	WW TK #4	Waste Water	12-30-92	1400

## ANALYTICAL RESULTS:

PARAMETER	METHOD	DETECTION LIMITS	WW TK #3 RESULTS	WW TK #4 RESULTS
Oil & Grease	EPA 413.2	0.5	1.2	1.2
Total Phenols	EPA 420.1	0.05	0.17	0.19

Results expressed as mg/L unless otherwise noted.

Sincerely,

Susan M. Coffey,

President

SMC/lws

This report is for the sole and exclusive use of the above-named client. Samples are retained 15 days from the report date, or until holding time expires. Results pertain only to samples submitted.

RECEIVED

JAN - 7 1993

KOPPERS INDS., INC. PORTLAND, OR

COFFEY LABORATORIES, INC.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452



## **COFFEY LABORATORIES - PENDLETON BRANCH**

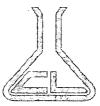
287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

# **CHAIN OF CUSTODY**

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WHITE COPY - COFFEY LABORATORIES

PINK COPY - CLIENTS COPY



# CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

PROJECT NUMBER — Applies only to samples submitted by the company. This data is provided at the companies discretion.

PROJECT NAME — Your company's project name. This data is provided at the companies discretion.

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**COLLECTION** DATE — The date on which the sample(s) was/were collected.

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**MEDIA** — This is a description of the sample matrix.

ANALYSIS REQUESTED — Make one column for each parameter or group of parameters associated to a bottle.

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SAMPLES SWIPPED VIA — How the samples are being shipped to the laboratory, e.g., "UPS".

# Koppers002764

## COFFEY LABORATORIES INC.

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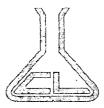
# **COFFEY LABORATORIES - PENDLETON BRANCH**

287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

# **CHAIN OF CUSTODY**

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SHADED AREA FOR LABORATORY USE ONLY
CHAIN OF CUSTODY INSTRUCTIONS ON BACK OF PINK COPY



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12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452

# COFFEY LABORATORIES - PENDLETON BRANCH -

287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

# **CHAIN OF CUSTODY**

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SHADED AREA FOR LABORATORY USE ONLY CHAIN OF CUSTODY INSTRUCTIONS ON BACK OF PINK COPY



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Koppers002768

**COFFEY LABORATORIES INC.** 

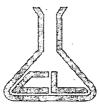
12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452

# **COFFEY LABORATORIES - PENDLETON BRANCH**

287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

# **CHAIN OF CUSTODY**

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Report Date: March 13, 1992

Job#: WG-920310AJ-1

PO#: VERBAL JOHN

(O&G/Phenols

Project#: None

Project: None

Attention: John Oxford

Koppers Industry

7540 NW St. Helens Rd. Portland, OR 97210

SAMPLE INFORMATION:

Date Samples Were Received By Laboratory: 03/10/92

Lab No.	Field Identification	Sample Matrix	Date	Time
1	Tank 65	Waste Water	03-10-92	1406

#### ANALYTICAL RESULTS:

PARAMETER	METHOD	DETECTION LIMITS	TANK 65 RESULTS
pH (S.U.)	EPA 150.1		6.19
Oil & Grease	EPA 413.2	0.5	trace
Total Phenols	EPA 420.1	0.05	ND
Residual Chlorine	SM 408E	0.01	0.03

Results expressed as mg/L unless otherwise noted.

ND means none detected at or above the detection limit listed.

SM means Standard Methods for the Examination of Water and Wastewater, 1985, 16th Edition.

Sincerely,

RCEVED

MAR 1 1992

Renee Chauvin Technical Director

RJC/lws

KOPPERS INDS.. INC.

PORTLAND OR
This report is for the sole and exclusive use of the above-named client. Samples are retained 15 days from the report date, or until holding time expires. Results pertain only to samples submitted.

COFFEY LABORATORIES, INC.

Volume: FORM Section: 4.0

Revision #: 1.00

Date: December 23, 1991

## Wastewater Analysis Form

Parameter	Method	Detection Limit	Took 105	Units
рН	EPA 150.1		6.19	s.u.
Flash Point	EPA 1020			°F
TSS	EPA 160.2	1		mg/L
дор	EPA 405.1	1		mg/L
COD	EPA 410.4	1		mg/L
Oil & Grease	EPA 413.2	0.5	Trace	mg/L
Total Cyanide	EPA 335.2	0.02		mg/L
Free Cyanide	SM 412-H	0.02		mg/L
Ammonia .	SM 417-A,D	* . XI		mg/L
Fluoride	EPA 340.2	0.2		mg/L
Total Phenols	EPA 420.1	0.05	NO	mg/L
Total Sulfides	SM 427-C	0.05		mg/L
Cadmium	*	0.0%		mg/L
Chromium	*	0.05		mg/L
Copper	*	0.05		mg/L
Lead	*	0.1		mg/L
Mercury	EPA 7470	0.0005		mg/L
Nickel	*	0.05		mg/L
Silver	*	0.05		mg/L
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# **COFFEY LABORATORIES INC.**

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452

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# **CHAIN OF CUSTODY**

PROJECT #



# COFFEY LABORATORIES - PENDLETON BRANCH

287 S.E. FIRST, PENDLÉTON, OR 97801 (503) 276-0385

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PINK COPY - CLIENTS COPY



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SAMPLES SHIPPED VIA - How the samples are being shipped to the laboratory, e.g., "UPS"



Report Date: November 27, 1991

Job#: WG-911119AP-2 PO#: VERBAL JOHN

(O&G/Phenols)

Attention: John Oxford

Koppers Industry

7540 NW St. Helens Rd.

Portland, OB 97210

SAMPLE INFORMATION:

Date Samples Were Received By Laboratory: 11/19/91

Lab No.	Field Identification	Sample Matrix	Date	Time
	موسد موسد موسد موسد مراح الحراج الحراج الحراج الحراج الحراج الحراج الحراج الحراج الحراج الحراج الحراج الحراج ا		~ ~ ~ ~ ;	
1	W-W-T-3	Waste Water	11-19-91	1540
2	W-W-T-4	Waste Water	11-19-91	1540

#### ANALYTICAL RESULTS:

PARAMETER	METHOD (1997)	DETECTION LIMITS	W-W-T-3 Results	W-W-T-3 Results
	the top the the the			
O11 & Grosso	BPA-413.2	0.5	8.8	8.9
Total Phenols	BPA 420.1	0.05	<b>Q.</b> 19	0.12

Results expressed as mg/L unless otherwise noted.

Sincerely.

Renee Chauvin Technical Director

RJC/lws

This report is for the sole and exclusive use of the above-named client. Samples are retained 15 days from the report date, or until holding time expires. Results pertain only to samples submitted.

COFFEY LABORATORIES, INC.

12423 N.E. Whitaker Way • Portland, OR • 97230 • (503) 254-1794 • FAX (503) 254-1452

BAL YETTOD\* MAMB

12, OS. 191

12423 N.E. WHITAKER WAY, PORTLAND, OR 97230 (503) 254-1794 • FAX (503) 254-1452

# **COFFEY LABORATORIES - PENDLETON BRANCH**

287 S.E. FIRST, PENDLETON, OR 97801 (503) 276-0385

# **CHAIN OF CUSTODY**

PROJECT #:	PROJECT NAME:	· · · · · · · · · · · · · · · · · · ·	P.O. #:		PAGE _	of F	PAGES : FO	R LABORATOR	ZUSE ÖNLY	
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COMPANY NAME:	Koppers 4	DO INC	<u> </u>			N. Contraction of the Contractio	JOB.#			<u> </u>
REPORT ATTENTIO	N: John O	xFord				, and the second			约二十四	
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SHADED AREA FOR LABORATORY USE ONLY
CHAIN OF CUSTODY INSTRUCTIONS ON BACK OF PINK COPY



# CHAIN OF CUSTODY INFORMATION / INSTRUCTIONS SHEET

PROJECT NUMBER — Applies only to samples submitted by the company. This data is provided at the companies discretion.

PROJECT NAME — Your company's project name. Phisidata is provided at the companies discretion.

COMPANY NAME — Name of the Company or incliniqual requesting the analysis from Coffey Laboratories, Inc.

REPORT ATTENTION — Name of the person who receives the laboratory report.

**SAMPLE COLLECTED BY** — The person who took the sample signs this box and gives his/her title.

FIELD ID — A short description of the sample point (For example: "Effluent from sand filter"). This description will appear on the report. Use one line per sample bottle.

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**SAMPLE REMARKS** — Record any comments regarding the sample(s) as a whole or information pertinent to the sample.

**SAMPLES SHIPPED VIA**—How the samples are being shipped to the laboratory, e.g., "UPS"

--- COFFEY LAB RESULTS 1990 ---

-Koppers002779-



FAX: (503) 254-1452

Tive to Deorge

May 16, 1990 Log # A900503-AC

Koppers Co., Inc. 7540 NW St. Helens Rd. Portland, OR 97210-3663 Attention: John Oxford

Sample Collected: 5/3/90, 1430 hrs

Sample Received: 5/3/90 Sample ID: Koppers Outfall

		DETECTION	
ANALYSIS	METHOD	LIMIT	SAMPLE
Oil & Grease	EPA 413.2	0.2	0.7
Total Phenois	EPA 420.1	0.05	0.30

Results expressed as mg/L unless otherwise noted.

Sincerely,

Victor A. Ferry, Quality Assurance Sincerely,

Renee Chauvin, Technical Director

RJC/mlh

This report is for the sole and exclusive use of the client. Samples are retained a maximum of 15 days from the report date, or until the maximum holding time expires.

RECEIVED

MAY 2 / 1990

KOPPERS INDS., INC. PORTLAND, OR

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Date/Time	BOD's	set 1	up at	source	lab:	Date/Time BCD's set up at DEQ lab:
-			_			
Date/Time	FC's	set u	pat:	source	lab:_	Date/Time FC's set up at DEQ lab:

Fill in your split sample results and mail to:

DEQ Lab 1712 SW 11th Ave. Portland, OR 97201 Attn: QA Chemist

NOTE - This form does not replace the "Request for Analysis" laboratory form.

12423 N.E. WHITAKER WAY PORTLAND, OREGON 97230

# CHAIN OF CUSTODY

(503) 254-1794 FAX (503) 254-1452

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SHADED AREA FOR LABORATORY USE ONLY
CHAIN OF CUSTODY INSTRUCTIONS ON BACK OF PINK COPY

12423 N.E. WHITAKER WAY PORTLAND, OR 97230 PHONE: (503) 254-1794 FAX: (503) 254-1452

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(12/06/89)



Deoge

May 14, 1990 Log #A900427-Q3 PO: Verbal John

Koppers Co., Inc. 7540 NW St. Helens Rd. Portland, OR 97210-3663 Attention: John Oxford

Samples Received: Q4/27/9Q

#1 - W-W-T-3 04/27/90 1100 hrs. #2 - W-W-T-4 04/27/90 1100 hrs. Sample ID:

#3 - Outfall - DEQ Split 04/26/90 1030 hrs. 05/02/90 1225 hrs.

PARAMETER	METHOD	DETECTION LIMITS	# 1	#2	#3	UNITS
_ <del> </del>						
Oil & Grease	EPA 413.2	0.2	0.8	<b>Q.9</b>	Q.7*	mg/L
Total Phenols	EPA 42Q.1	0.05	0.34	0.31	Q.36*	mg/L

\*This sample was incorrectly collected and preserved by DEQ personnel and these data can only be considered as appoximate results

Sincerely,

::

Victor A. Perry,

Quality Assurance

Sincerely.

Renee Chauvin, Technical Director

RJC/lws

This report is for the sole and exclusive use of the client. Samples are retained a maximum of 15 days from the report date, or until the maximum holding time expires.

# RECEIVED

MAY 1 8 1990

KOPPERS INDS., INC. PORTLAND, OR



March 20, 1990 Log #A900309-Z3

Koppers Company, Inc. 7540 NW St. Helens Road Portland, OR 97210-3663 Attention: John Oxford

Sample Collected:

03/05/90 03/09/90

Sample Received:

ANALYSIS REQUESTED: Hydrocarbon Scan in water, by EPA Method 615, GC/FID.

ANALYSIS	DETECTION LIMIT	KOPPERS* OUTFALL RESULTS	SAINT HELENS ROAD RESULTS	CULVERT FROM RIVERGATE ROCK RESULTS
Gasoline	250	3200	ND	ND
Diesel	5 <b>0 0</b>	ND	ND	ND

Results expressed as ug/L unless otherwise noted.

ND means none detected at or above the detection limit listed.

The contamination in the sample contains the major components of gasoline and some other components. It may actually be a paint thinner or a fuel other than gasoline.

Sincerely,

Victor A. Perry

Quality Assurance

Renee Chauvin Technical Diréctor

RJC/daj

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RECEIVED

MAR 23 1990

KOPPERS INDS., INC. PORTLAND, OR

12423 N.E. WHITAKER WAY PORTLAND, OREGON 97230

# **CHAIN OF CUSTODY**

(503) 254-1794 FAX (503) 254-1452

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COMPANY NAME: REPORT ATTENTION:	ppers								<u> 107111-23</u>
SAMPLES COLLECTED BY:	· · · · · · · · · · · · · · · · · · ·							CUSTABBR:	Kstrapavi
FIELD IDENTIFICATION:		LAB **LOC + ID*	COLI DATE	ECTION TIME	MEDIA		ANALYSES REQUESTED		ANALYSIS REMARKS:
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12423 N.E. WHITAKER WAY PORTLAND, OR 97230 PHONE: (503) 254-1794 FAX: (503) 254-1452

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(12/06/89)

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Koppers Rep Groop Helfon 1-24-90

1/24/90 Rec. by Suche Mar Sy 1/24/90 345pm

12423 N.E. WHITAKER WAY PORTLAND, OREGON 97230

# CHAIN OF CUSTODY

(503) 254-1794 FAX (503) 254-1452

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COMPANY NAME: REPORT ATTENT	ION:						9			JOB#: A900/23-KG CUSTABBR: KORPENS	
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SAMPLE REMARKS	:								EXPRESS	S UPB MAIL	XX OREY TAXI LAB

WHITE COPY - COFFEY LABORATORIES

PINK COPY - CLIENT'S COPY

SHADED AREA FOR LABORATORY USE ONLY

Koppers002789

COFFEY LABORATORIES THIS SECTION FOR LABORATORY USE ONLY 12423 NE WHITAKER WAY LABORATORY LOG#: A910,23-K4 PORTLAND, OREGON 97230 CUSTABBR: Koppers NEW: DUE DATE: 1/26/40 VERBALS RESULTS: 503-254-1794; FAX: 254-1452 NO TYPING DUE DATE: PAYMENT CODE: 3 PAYMENT BY: CASH: CHECK: MAIL CONFIRMATION: DELIVERY BY: CXX DATE/TIME : .\_\_\_ LABORATORY REPORT INFORMATION: COMPANY NAME: Koppers Co., Inc. MAILING ADDRESS: 7540 NW St. Helens Rd. OR: CITY, STATE, ZIF: Fortland 97210-3663 REPORT ATTENTION: John Oxford PHONE: 503-286-3681 REPORT CMMNTS: \ -()-S/E REPORT ATTENTION: DO YOU NEED VERBAL RESULTS? NO PHONE VERBAL RESULTS TO: \_\_\_\_\_ PICK-UP / DELIVERY ADDRESS: BILLING INFORMATION: BILLING NAME: Koppers Co., Inc. BILLING ADDRESS: 7540 NW St. Helens Rd. OR 97210-3663 CITY, STATE, ZIP: Fortland BILLLING ATTENTION: John Oxford PHONE: 503-286-3681 BILLING COMMENTS: -0-=0 INFORMATION DO YOU HAVE A QUOTE NUMBER FOR THIS JOB? YES / NO QUOTE #: DOES YOUR COMPANY USE PO# ? YES / NO IF NO PLEASE INITAL HERE: STANDING PO#: VERBAL JOHN (0%G/Phenols-\$35) JOB RELEASE P.O.: COMMENT FIELD:

#### PAYMENT AUTHORIZATION:

	BURCHARGE	(2 x standard price) (1.5 x standard price)	INITIAL	HERE .	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
STANDARD 9	SURCHARGE	(standard price)	INITIAL	HERE	

VERIFICATION OF REPORT INFORMATION, BILLING INFORMATION AND SURCHARGE AUTHORIZATION:

Signature Graye Haffor a Date: 1-23-90 Time: 11-14 AM

Place Stamp Here

Miled 2/26/92

Oregon DEQ Hazardous & Solid Waste Division Attn: Hazardous Waste Forms Clerk 811 SW Sixth Avenue Portland, Oregon 97204

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•	This site is exempt from the requirement to file 1991 Hazardous Waste Reporting Forms because:
	1. The facility is <b>not</b> an RCRA Small or Large Quantity Hazardous Waste Generator. The facility (check one):
	☐ Generates no hazardous waste
	☐ Is a Conditionally Exempt Small Quantity Generator (CEG)
,	Other (please explain):
	and, 2. This facility is <b>not</b> a hazardous waste Treatment, Storage and Disposal facility (TSD), and
	3. This facility is <b>not</b> a designated hazardous waste recycling facility
•	3. This facility is <b>not</b> a designated nazardous waste recycling facility
1	It is expected that this site will remain exempt from the requirement to file Hazardous Waste Reporting Forms (check one):
	☐ For 1991 only
	<b>又</b> Permanently
	Other (please specify):
	222 227242
	RCRA <u>EPA/</u> DEQ ID Number (if available): ORD 0277343
	Facility Name: KOPPERS INDUSTRIES INC
•	Facility Location Address: 7540 NW ST HELENS RD PORTLAND OR 97210
	Contact Name: JOHN A OXFORD
•	Phone Number of Contact: ( <u>503</u> ) <u>286–3681</u>
*	

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#### SPILL PREVENTION CONTROL & COUNTERMEASURE PLAN

Section 311(j)(1)(C) of the Federal Water Pollution Control Act Amendments of 1972, authorized the President to issue regulations establishing procedures, methods, equipment and other requirements to prevent discharges of oil and hazardous substances from vessels and from onshore facilities and offshore facilities, and to contain such discharges. The President delegated the responsibility for such regulations to the Administrator of the Environmental Protection Agency. Accordingly, the Administrator developed and promulgated Oil Pollution Prevention Regulations in 40 CFR Part 112. These regulations require owners and operators on shore and offshore non-transportation-related facilities to develop and implement Spill Prevention Control and Countermeasure (SPCC) Plans to prevent the discharge of oil into the navigable waters of the United States or adjoining shoreline. Owners or operators are not required to develop an SPCC Plan if their facilities have not discharged and because of their location could not be reasonably expected to discharge oil into the navigable waters of the United States.

GENERAL INFORMATION
1. Name and location of facility:
Name Koppers Company, Inc.
Location:
Direction and distance to nearest town (attach map)
County Multnomah State Oregon
2. Name, address and phone number of owner or operator:
Name Koppers Company, Inc.
Address: 7540 N.W.
Street St. Helens Rd. State Oregon
City Portland Zip 97229 County Multnomah
Telephone No. 503 286-3081
3681
3. Name or title and telephone number of person in charge of facility:
Name or title Paul Guth Telephone: 503 286-3681
Name or title Paul Suth Telephone: 503 286-3681
4. Name and telephone number of person responsible for oil spill prevention
at facility:
JOHN A OXFORD
Name Paul Guth Telephone: 503 286-3681
Certification
I hereby certify and attest that I am familiar with the facility and the
information contained in this plan and that to the best of my knowledge and
belief such information is true, complete and accurate. Further, this plan has been prepared in accordance with good engineering practices.
has been prepared in accordance with good engineering practices.
En Bernett, In Em Bernett /2
Printed name of Registered Engineer Signature of Registered Engineer
Date: Registration No.: PE 002433
Page 1 of 3 pages

#### SPILL RECORD

Yes No

1. This facility, over the past year, has had a reportable spill.

\_\_X\_\_

2. Descriptions of any reportable spills are given below, including corrective action taken and plans for preventing recurrence:

#### Phone Numbers

National Response Center	800-424-8802
Department of Environmental Quality	229-5696
Fire Department	232-2111
Police Department	248-5720

#### Information To Be Transmitted

- 1. Time spill occurred or was first observed.
- 2. Where spill occurred, and present location, if moving.
- 3. Type of chemical spilled.
- 4. Estimate of amount spilled and rate of release, if continuing.
- 5. If from rail car or truck owner or consignee, volume and location.
- 6. Environmental conditions, such as wind speed and direction, weather, etc.
- 7. Description of area likely to be affected.
- 8. Cause of spill, if determined.
- 9. Corrective action taken.

Page 2 of 3 pages

# PREDICTION OF POTENTIAL SPILLS

2. Nearest navigable water:  A. Name: Williamette River  B. Distance and direction from plant: East of Plant approx. 1800 ft.  3. Possible spill sources:  Source Type of Failure Volume(bbls.) Rate(bbls./hr.) of Flow  See attached sheet.	_			
B. Distance and direction from plant: East of Plant approx. 1800 ft.  3. Possible spill sources:  Maximum Maximum Flow Direct Source Type of Failure Volume(bbls.) Rate(bbls./hr.) of Flore				
3. Possible spill sources:  Maximum Maximum Flow Direct Source Type of Failure Volume(bbls.) Rate(bbls./hr.) of Flor				
Source Type of Failure Volume(bbls.) Rate(bbls./hr.) of Flor	_			
Source Type of Failure Volume(bbls.) Rate(bbls./hr.) of Flor				
See attached sheet.				
SPILL PREVENTION PLAN CHECKLIST				
<ul> <li>Secondary containment and/or diversionary structures are used for possible spill sources:</li> </ul>				
Source Type of Containment or Diversionary Structure				
See attached sheet.				
Select from: Onshore: Dikes, berms, retaining walls; curbing; culverting, gutters, drain weirs, booms, other barriers; spill diversion and retention ponds Offshore: Floating booms or fences; floating oil/water separators with store.  2. If the containment or diversionary structures above are impracticable, stat reasons for impracticability N/A	age.			
and attach a strong oil spill contingency plan and written commitment of manpower, equipment and materials required to expeditiously control and remove any harmful quantity of oil discharged. Check if attached:  Contingency Plan Written Commitment				
Discussion:				

Page 3 of 3 pages

## SPILL PREVENTION PLAN CHECKLIST

3.	Onshore	<b>Facilities</b>	(Excluding	Production)

Α.	Drain	nage:	Yes	<u>No</u>
	(1) (2) (3) (4)	Drains from diked storage areas have valves. Drain valves are manual, open-and-closed design. Rainwater from diked areas is inspected before draining. Plant drainage systems are equipped with either:	<u>X</u> X	
	( )	a. Ponds, lagoons, or catchment basins to retain oil, or b. A diversion system at the final discharge point which could contain an uncontrolled spill and	<u>X</u>	
	(5)	return the oil to the plant.  Flow of drainage water between treatment units is by either:	<del></del>	
		<ul><li>a. Natural hydraulic flow, or</li><li>b. Two "lift" pumps (one a spare and one permanently installed).</li></ul>		
Discuss	ion:			
В.	Bu 1k	Storage Tanks		
	(1)	Tank material and construction comply with API specifications	X	
	(2)	Secondary containment volume () is greater than the largest single tank capacity plus an allowance for rainwater.	х	
•	(3)	Drainage of rainwater from diked areas into open waters, by-passing inplant treatment, is		
•		accomplished according to the following:  a. Normally the bypass valve is sealed close.  b. The rainwater is inspected to ensure		
		compliance with water quality standards.  c. The bypass valve is opened and resealed under responsible supervision.		
		d. Records are kept of bypassing and drainage events.		
	(4)	Buried metallic storage tanks:  a. New tanks are coated and wrapped to reduce		
		corrosion. b. Cathodic protection is provided for tanks as determined by electrolytic testing.		
		c. Tanks are pressure tested on a scheduled, periodic basis.	-	
	(5)	Partially buried metallic tanks are avoided (for storing oil) unless adequate shell coating is provided for the buried portion.		
		The first and the same forester.		

(Onshore) Pg. 1 of 5 pgs.

## SPILL PREVENTION PLAN CHECKLIST

		103	110
(6)	<ul><li>methods:</li><li>a. Hydrostatic testing</li><li>b. Visual inspection</li><li>c. Shell thickness testing (comparison records of</li></ul>	<u> </u>	
	shell thickness reduction are maintained)	<del></del>	
(7)	<ul> <li>Internal heating coil leakage is controlled by one or more of the following:</li> <li>a. Monitoring the steam return or exhaust lines for oil.</li> <li>b. Passing the steam return or exhaust lines through a settling tank, skimmer or other separation system.</li> <li>c. Installing external heating systems.</li> </ul>	<u>X</u>	
(8)	All bulk storage tanks are externally inspected on a monthly basis (including seams, rivets, bolts, gaskets, nozzle connections, valves, connected pipelines, and tank foundation and/or supports) for leaks or failures.	<u> </u>	
(9)	<ul> <li>Tanks are fail-safe engineered by the following:</li> <li>a. High liquid level alarms with an audible signal at a constantly manned station.</li> <li>b. High liquid level pump cutoff devices.</li> <li>c. Direct communication between the tank gauger and pumping station.</li> <li>d. One fast means of determining the liquid level in tanks (such as digital computers, telepulse, or direct visual gauges).</li> <li>e. Liquid level sensing devices are inspected and tested on a scheduled, periodic basis.</li> </ul>	x	
<b>.</b>	ł		
iscuss	ion:		
	ra-Facility Transfer Operations, Pumping, and Inplant Process shore; Excluding Production)		
Α.	Buried Pipelines		
•	<ol> <li>Pipelines are wrapped and coated to reduce corrosion</li> <li>Cathodic protection is provided for pipelines as determined by electrolytic testing.</li> <li>When a pipeline section is exposed, it is inspected</li> </ol>		
	and corrective action taken as necessary.	<u> X</u>	
iscuss	ion:	<del></del>	
<u> </u>			
<del></del>			

(Onshore) Pg. 2 of 5 pgs.

	SPILL PREVENTION PLAN CHECKLIST		
		Yes	No
B	Pipeline terminal connections are capped or blank-flanged and		
	marked if the pipeline is not in service or on standby service		
	for long periods.	<u>X</u>	
	•		
Discuss	ion:		
·			
С.	Pipe supports are designed to minimize abrasion and corrosion		
	and allow for expansion and contractions.	<u>X</u>	
Diames	ion:		
ח.	All aboveground valves and pipelines are inspected on a schedu	l ed	
υ•	periodic basis (including flange joints, valve glands and bodi		
	catch pans, pipeline supports, locking of valves, and metal su		
	faces).	X	
	,		
Discuss	ion:		
·		<del></del> -	
Ε.	Vehicles entering the facility are inspected and/or warned		
	to avoid damaging aboveground piping.	X	
Discuss	ion:		
F 7	Sociality Month Complements I sold a /Wilderline (Orghans)	· ·-	
5. <u>Int</u>	ra-facility Tank Car & Tank Truck Loading/Unloading (Onshore)		
Α.	Loading/unloading procedures meet the minimum requirements		
	and regulations of the Department of Transportation.		
В.	The unloading area has quick drainage system.	<del></del>	-
C.	The containment system will hold maximum capacity of any	<del></del>	*****
- •	single tank truck loaded/unloaded in the plant.		
D.	An interlocked warning light or physical barrier system		-
2.	or warning signs are provided in loading/unloading areas		
	to prevent vehicular departure before disconnect of		
	transfer lines.		
E.	Drains and outlets on tank trucks and tank cars are		
	checked for leakage before loading or unloading.	X	
Discuss	sion:		

(Onshore) Pg. 3 of 5 pgs.

# SPILL PREVENTION PLAN CHECKLIST

6.	Ins	pections and Records	Yes	No
	Α.	The required inspections follow written procedures	-	
	В.	The written procedures and a record of inspections, signed by the appropriate supervisor, are included in the SPCC Plan.		'e-maniferance
Dis	cuss	ion:	· · · · · · · · · · · · · · · · · · ·	
7.	Sec	urity (Excluding Production)		•
	, <b>A</b> .	Plants handling or storing oil are fenced.	X	
	В•	Entrance gates are locked and/or guarded when the plant is unattended or not in production.	X	
	C.	Any valves which permit direct outward flow of a tank's contents are locked closed when in non-operating or non-standby status.		
	D.	Starter controls on all oil pumps in non-operating or non-standby status are locked or electrically isolated in the "off" position.		
	Е.	The loading/unloading connections of oil pipelines are capped or blank-flanged when not in service or on standby service for extended periods.	<del></del>	
	F.	Description of the lighting around the facility: General yard	light	ing.
Dis	cuss	ion:		
8.	Per	sonnel, Training, and Spill Prevention Procedures		
	Α.	Personnel are properly instructed in the following:		
		(1) Operation and maintenance of equipment to prevent oil discharges, and	<u>X</u>	
		(2) Applicable pollution control laws, rules, and regulations.	X	
	В.	Spill prevention briefings for the operating personnel are conducted on a scheduled, periodic basis.	·	, 

(Onshore) Page 4 of 5 pgs.

# SPILL PREVENTION PLAN CHECKLIST

Discussion:	
<del></del>	

(Onshore) Pg. 5 of 5 pgs.

# KOPPERS COMPANY, INC.

# PORTLAND, OREGON

Tank No.	Gallons (M)	÷	Contents
1	660		Tax- & not with
2	1065	ş.	Tar & not in use
3	99		Creosote
4	99		Creosote
11	254		Tar Cresste
12	45		Far Cressote
. 17	20		Creosote
18	20		Creosote
19	20		Creosote
20	317		Creosote
23	20		Creosote
28	45		Effluent Empty service
33	45		Creosote
34	45		Creosote
39	20		Fuel- creosate
65	880		Tax Creasitie
66	240		Creosote
67	102	:	Creosote
68	248	•	Creosote
90	209		Creosote
99	200		Creosote
101	750		Creosote
V-207	15		oper empty

Prediction of Potential Spills

2B. The water flow leaving the plant and entering the Willamette River at approx. 3/4 of a mile from the plant. The water flows South of the plant and then East into the river.

The river at closest point to the plant is 1800 ft., but the water from the plant does not enter here.

PETROLEUM SPILL CONTINGENCY PLAN	DATE	6/16/78
COMPANY NOPPERS C& INC	PHONE	286-3681
ADDRESS 7540 N.W St Helens	1 CITY Gortland	STATE ON ZIP 97229
•		
1. Paul W. Hull  2. Nenry. F. Rassi	TITLE Pet Suj	T PHONE 644-1570
2. Henry F. Rasse	TITLE Chemest	PHONE 253-1962
3	TITLE	PHONE
4	TITLE	PHONE
E P DEVICES & OTHER EQUIPMENT OF		
1. PUMPS PORTABLE POWER:		c o stored whe
2. TOOLS: RAKES SHOVELS BUCK		
3. SORBANTS: TYPE log boom UNIT		$\wedge$
4. TRUCKS / clumb - / tanker TANK	is V	STORED
4. TRUCKS / clumps - / tanker TANK 5. HOSE SIZE 2/2	AMOUNT	STORED Levelouses
OUTSIDE ASSISTANCE AVAILABLE:		7
1. ADDITIONAL SORBANTS: CALL	: Van liter & Rodge	~ PHONE: 222 - 1721
	,	My PHONE: 286-5891
3. POWER EQUIPMENT, DIGGERS, LOADERS, (	CALL: Ginda Cons	PHONE: 226-4341
		00 PHONE: 286 - 2048
5. SKIMMING & VACUUM EQUIPMENT CALI		
6. PORTABLE GENERATORS, LIGHTS CALI	: Ginda Con	d PHONE: 226-4341
COMPANY RADIO COMMUNICATIONS:	V	
FREQUENCY MOBILE	JNITSCA	ALL LETTERS:
YARD & AREA INFORMATION (SEE DR.		
1. TANKS 23 ABOVEGROUND	Arrive .	TANK SIZE
PRODUCTS STORED Creveolo		ank form
2. PIPELINES: VALVES, EMERGENCY VAL		Y
3. SEWERS: FLOOR DRAINS, STORM SEWE		S OF SEWERS & DRAINS
4. GATES & DOORS: KEY LOCATED		CALL:



Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

# Industrial Source Control Division Statement of Non-Discharge

Company Name:	Koppers Indust	ries, Inc.		
Facility Address:	7540 NW St. H	lelen's Rd		·
	Portland, OR 9	7210	· · · · · · · · · · · · · · · · · · ·	<u>.</u>
Telephone Number:	503-286-3681			
I certify under penalty of law	that for the year:	2002	· · · · ·	
of Portland's s		orical Process	: Wastewater	harged to the City was discharged to m. (Please mark one).
I have incorporated altern categorical industrial proces regulations.	ative methods of e	liminating all	wastewater	generated from my
I understand that by signing wastewater or non-categor aware that there are significated of fine and imprisonment for	ical process wastews ant penalties for subm	iter is discharg	ed to the City	y's scwer system. I am
Authorized Official Signatur	re:	Du_		
Title:		Plant	MANA	9 8/2
Date:		1/2	MANA 4/03	
	•			٠.

S:\Customer\JU-P\Portland Bul\Permit\Forms\00 ndciu cert.doc

cc: T. Self

1999,07-01



286 3681

Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

## NO DISCHARGE CERTIFICATION REPORT

Industrial Users subject to limits for processes regulated under categorical pretreatment standards, 40 CFR 414 that elect not to discharge to the City of Portland's sanitary sewer must submit a periodic "No Discharge Certification Report" to comply with national pretreatment regulations, the City of Portland's Chapter 17.34, Administrative Rules.

Facility Name:

Koppers Industries

Address:

7540 NW St Helens Rd.

Portland, OR 97210

Reporting Period:

From January 1, 1999

To June 30, 1999

rang gan kasile rang talihang bib

THIS REPORT DUE TO THE CITY BY: July 15, 1999

# CHECK BOX IF NO DISCHARGES OF REGULATED PROCESS WASTEWATER HAVE OCCURRED

M Based on my inquiry of the person or persons directly responsible for environmental compliance, I certify that, to the best of my knowledge and belief, no discharges of any regulated wastewaters occurred since filing of the last report.

I have personally examined and am familiar with the information submitted in this report and any attachments. Based on my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature:

Title:

Date:

A.S. Emeren

\_\_\_\_\_

CC: T. Self, KIT

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286 3681

Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

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Facility Name:

Koppers Industrics

Address:

7540 NW St Helens Rd.

Portland, OR 97210

Reporting Period:

From July 1, 1999

To December 31, 1999

THIS REPORT DUE TO THE CITY BY: January 15, 2000

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Signature:

Title:

Date:

cc: T. SelF, EII

FROM : KOPPERS INDUSTRIES, INC

#639 P.01/03 #253 P.04/04

DRAFT

Submit construction/operating permit applications as needed. NPDES renewal due 1/31/04.  Send KII CSG copies of all correspondence with regulatory agencies and stakeholders including new permits, permit applications, monitoring reports, spill reports and update reports.  Etc.	operations, deleted operations and substantial changes. Due 9/1/02 submit application at least 180 days before expiration.	
correspondence with regulatory agencies and stakeholders including new permits, permit applications, monitoring reports, spill reports and update reports.		
	correspondence with regulatory agencies and stakeholders including new permits, permit applications, monitoring reports, spill reports and update reports.	

Post-it* Fax Note	7671	Date //18/00 pages 3
To TGE		From Amas
Co.Dept. Revi	sponist	COLLECTIONS
Phone #		
Fax#		Fax#

FROM : KOPPERS INDUSTRIES, INC.

1900.01-13

Ø9:58 14:25

#639 P.02/03 #K63 F.03/04

DRAFT Sponsove currency commercia Semisonually City of Portland no discharge No bongen required

After the 11:5/00 Report report, due nuclear and Appually Review air operating air permit, Submit fume system study June 2000 Complete and submit Oregon State Fire Marshal's Hazardous substance survey SARA title III due 11/30. SARA 313 (form R report) due July 1. Annual pesticide report for pesticide-producing establishments due March 1. RCRA training. Hazwoper refresher training. Develop and implement a SH&E training plan. Ensure new or transferred employees receive the appropriate training. Ensure job descriptions are updated and include hazardous material documentation. Post OSHA 200 log due February 1 Triennial Review SPCC plan and update as necessary. Certification by a PE \_\_\_\_\_\_ required. DOT training. Quadrennial TSCA inventory report due December 2002, 2006... Quintennial Review and update waste minimization plan. Other Update air permit for new

FROM : KOPPERS INDUSTRIES, INC.

FROM :

1900.01-13 W1-V5 Ø9:58

#639 P.03/03 FK55 M. 06/04

DRAFT

# Portland Inspection and Reporting Activities

		olete	) _ <b>C</b> ORAL	neut
Dally				
Daily plant tour-inspect				
hazardous waste storage and	,			
inspect for leaks, drams, waste		•	• •	
management, management	•	• • •	·	
monitor air pollution control				
devices (fume etc.)	,			
		•	1	•
			}	
Inspect storage tanks, process				
areas and containment areas				
Ensure appropriate labels				
ODEQ requires clean up of			ļ	
spills/release within 24 hours.			<b>}·</b> *	
Principal Wallet at Induity.	•			
Weekly		<del>                                     </del>		
Review DMR laboratory		<del></del>	<del> </del>	
results.				
Inspect liquid pitch lines and		<del> </del>	<del> </del>	<del></del>
tank			<b>f</b>	
Inspect/document container		<del> </del>		
Storage areas.	•	,	{	
Monthly	<del></del>		<del>                                     </del>	
Conduct monthly SH&E		+		
meeting. Submit minutes and		•	]	
procedures to CSG.	•	1	)	
Conduct plant sump	<del></del>	<u> </u>	<u> </u>	
		· ·		
inspections.			}	
	<del></del> -			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•			
T				
Prepare and submit NPDES		•		
report. Copy of DMR to CSG.				
Inspect all emergency	, •	,	Í	
equipment (eyewashes,	•			
showers, SCBA, monitors,			1	
stretchers and fire blankets).				
			(	•
			1	•
Quarterly	<u>.                                    </u>			
NPDES sampling and report				
PAH'S	·			
Update MSDS books/	and the second	ال عليه أج إن المن المنابعة الوائد الإند	1. Just 2 d. 1. 1. 1.	



Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

## NO DISCHARGE CERTIFICATION REPORT

Industrial Users subject to limits for processes regulated under categorical pretreatment standards, 40 CFR 414 that elect not to discharge to the City of Portland's sanitary sewer must submit a periodic "No Discharge Certification Report" to comply with national pretreatment regulations, the City of Portland's Chapter 17.34, Administrative Rules.

**Facility Name:** 

Koppers Industries

Address:

7540 NW St Helens Rd.

Portland, OR 97210

Reporting Period:

From July 1, 1998

To December 31, 1998

THIS REPORT DUE TO THE CITY BY: January 15, 1999

# CHECK BOX IF NO DISCHARGES OF REGULATED PROCESS WASTWATER HAVE OCCURRED

Based on my inquiry of the person or persons directly responsible for environmental compliance, I certify that, to the best of my knowledge and belief, no discharges of any regulated wastewaters occurred since filing of the last report.

I have personally examined and am familiar with the information submitted in this report and any attachments. Based on my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature:

Title:

Date:

- A.S. FAMELER

499

CC: T. Self, KII

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Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

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Signature:

Title:

Plant Manager

Date:

7/1/98

CC: TRACI Seif, LIR

S:\FORMS\DRAFT\NDCR.DOC



1211 S.W. 5th Ave., Suite 800, Portland, Oregon 97204-3713 (503) 823-5320, FAX (503) 823-5559

### NO DISCHARGE CERTIFICATION REPORT

Industrial Users subject to limits for processes regulated under categorical pretreatment standards, 40 CFR 464.20 that elect not to discharge to the City of Portland's sanitary sewer must submit a periodic "No Discharge Certification Report" to comply with national pretreatment regulations, the City of Portland's Chapter 17.34, Administrative Rules, and Permit.

Report due January 15, 1998\_ to: Industrial Source Control Division

Industrial Source Control Division Bureau of Environmental Services. 6543 N. Burlington Ave. Portland, OR 97203

Facility Nam	e: Koppers Industries
Address:	7540 NW St. Helens Rd
	Portland, OR 97210

Reporting Period (From) July 1, 1997

(To) <u>December 31, 1997</u>

(CHECK BOX IF NO DISCHARGES OF REGULATED PROCESS WASTEWATERS HAVE OCCURED.)

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Signature

PL.

TS+IA

CC; W.E. SWEARINGEN

1-1



1211 S.W. 5th Ave., Suite 800, Portland, Oregon 97204-3713 (503) 823-5320, FAX (503) 823-5559

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Industrial Users subject to limits for processes regulated under categorical pretreatment standards, 40 CFR 464.20 that elect not to discharge to the City of Portland's sanitary sewer must submit a periodic "No Discharge Certification Report" to comply with national pretreatment regulations, the City of Portland's Chapter 17.34, Administrative Rules, and Permit.

Report due July 15, 1997 to:

Industrial Source Control Division Bureau of Environmental Services. 6543 N. Burlington Ave. Portland, OR 97203

Facility Na	me:	Koppers Industries
Address:	7540	NW St. Helens Rd
	Port	land, OR <u>97210</u>

Reporting Period (From) January 1, 1997

(To) June 30, 1997

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Signature

Date: 7/1/

Title

1-1

CC: W.E. Swerkingen, KII

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Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

SITE ADDRESS: 7540	NW S	Helin	1 Cal	Portland, OR		
INSPECTION TYPE:   Mino	r D Major	☐ Pre-po	ermitting	D Other:		
DESCRIBE THE PROCESS(ES)/(	PERATION(S) I	NSPECTED:	•			
purhiturion	- of con	& Har	oriel	<u></u>	***************************************	
		· · · · · · · · · · · · · · · · · · ·			<del>*************************************</del>	
PRETREATMENT SYSTEM:	CONDITION & (	OPERATION is improvement		COMME	NTS	
□ Clarifier		O O			Carrier Company	1000
☐ Oil & Water Separator		D		popular de la constitución de la		
D pH adjustment		<b>D</b> .				
□ Other	o <sub>.</sub>	<b>O</b>	32333			1.00
POINT(S) OF COMPLIANCE:					ř	
LOCATION/CODE	CONDITION &	OPERATION needs improvemen		COMME	ENTS	
2.48 (1.56 (	, good	neeas improvemen	Figuralisas			
			-,		The second second	***************************************
2.	.0	ā				£
2. 3.		_	12 - 55 21 - 52 21 - 5			<u> </u>
2. 3.  RECORDS   ASPP	· O	ā		TOMP OTHER:		<u> </u>
2. 3.  RECORDS	0	D FACT SE				
2. 3.  RECORDS	0	D FACT SE			ION	
2. 3.  RECORDS	O O BRATION LOG	D FACT SE		OTHER:	ION	
2. 3.  RECORDS	O O BRATION LOG	D FACT SE		OTHER:	ION	
2. 3.  RECORDS	O O BRATION LOG	D FACT SE		OTHER:	ION	2 S.25
2. 3.  RECORDS	BRATION LOG HAUL	D FACT SE		OTHER:	ION	
2. 3.  RECORDS	BRATION LOG HAUL	D FACT SE		OTHER:	ION	
2. 3.  RECORDS	BRATION LOG HAUL	D FACT SE		OTHER:	ION	
2. 3.  RECORDS	BRATION LOG HAUL	D FACT SE		OTHER:	ION	
2. 3.  RECORDS	BRATION LOG HAUL	D FACT SE		OTHER:		
2. 3.  RECORDS	BRATION LOG HAUL	D FACT SE D PERMIT		DUE DA	TE(S)	
2. 3.  RECORDS	BRATION LOG HAUL	D FACT SE D PERMIT		DUE DA	TE(S)	
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2. 3.  RECORDS	BRATION LOG HAUL	D FACT SED PERMIT		DUE DA	TE(S)	4,35,3

Population Commen





Water Pollution Control Laboratory

	aur's Industries, In N.W. St. Helens Rd	Portland, OR 972/0
INSPECTION TYPE: B Mi	inor □ Major □ Pre-p	ermitting   Other:
DESCRIBE THE PROCESS(ES	)/OPERATION(S) INSPECTED:	
***************************************		
PRETREATMENT SYSTEM:	CONDITION & OPERATION good needs improvement	COMMENTS
Clanifier		
Oil & Water Separator		HAR UNDER SUPPLEMENT
pH adjustment Other		
		Section Control of the Control of th
POINT(S) OF COMPLIANCE:	001017101	
LOCATION/CODE	CONDITION & OPERATION good needs improvemen	COMMENTS
1. N/A		
2. 3.		
REVIEW: CAL	LIBRATION LOG DERMIT	OTHER:
SLUDGE DISPOSAL: PROCESS	HAULER	DESTINATION
PROCESS	Saften-Ckgy 10	DESTINATION
PROCESS	Fion,	
PROCESS  1. A-D Chauses  2. Haz / Nav. has  3. GENERAL INSPECTION NOTE	Salten-Ckan/Cl	
PROCESS / 1. A-B Chauses 2. Haz / Nov. huse 3.	Salten-Ckan/Cl	
PROCESS  1. A-B CHARLES  2. Haz   Nan hus  3.  GENERAL INSPECTION NOTE	Salten-Ckan/Cl	
PROCESS  1. A-D Chauses  2. Haz / Nav. has  3. GENERAL INSPECTION NOTE	Salten-Ckan/Cl	
PROCESS  1. AD MOUSES  2. Haz / Non haz  3.  GENERAL INSPECTION NOTE  LODGATING AS PT	Salten-Ckan/Cl	lan, Harbors
PROCESS  1. A-D Clauses 2. Haz / Non has 3.  GENERAL INSPECTION NOTI  Lip da in 1 AS PL  FOLLOW UP ACTION(S): 1. SUDMIN UP ACTION	Salten-Ckan/Cl	lan, Harbors
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# ENVIRONMENTAL SERVICES

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Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

	TIA	. /		TION FORM	
INDUSTRY	Y NAME:	KOPPERS	INDUST	RIES, INC.	
SITE ADD	RESS:	7540 NW	St, Helen's	Rd Portland, OR	97210
INSPECTION	ON TYPE: 🛛	Minor 🔀 M	ajor 🛭 Pre-po	ermitting   Other:	
DESCRIBE	E THE PROCESS	S(ES)/OPERATION	(S) INSPECTED:		
51e. 410+	m Boiler	Touk Farn	1 Liquid G		qe tanks
PRETREA'	TMENT SYSTE	M: CONDITION	N & OPERATION needs improvement	COMME	NTS
☐ Clarifie	r	. 0			
Oil & V	Water Separator	. 0	<u>D</u> .	$\Delta = \Delta $	The Control of the Co
pH adju	stment	0	<b>D</b>		
□ Other	***************************************	<u> </u>	۵		1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
POINT(S)	OF COMPLIAN	CE:			
LOCA	ATION/CODE	CONDITION	N & OPERATION needs improvemen	СОММЕ	NTS
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RECORDS REVIEW:		ASPP CALIBRATION LO	FACT SH		
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2. 3.		Part and the control of the control			***************************************
, ,	INSPECTION		,		
, ,	INSPECTION N		,		
FOLLOW	UP ACTION(S):			DUE DAT	E(S)
FOLLOW	igued 1		Tarna Art	DUE DAT	<b>E</b> (S)
FOLLOW	UP ACTION(S):		Comment of the Commen	DUE DAT	E(S)
FOLLOW-1	UPACTION(S): VOYE	Vowers	DA	TE: 2/15/01	E(S)
FOLLOW-1  1. // 2  3. SPECTOR(S):	UPACTION(S):	Vowels HULTROP	DA	W Kratinost program o	
FOLLOW-1  1. // 2	UPACTION(S): VOYE	Vowers	DA DA (print)	TE: 2/15/01	REVIEWED BY  bidustial Provisionent Sopervisor
FOLLOW-1	UPACTION(S): VOYE	Vowels HULTROP	DA	TE: 2/15/01 TE:	REVIBWED BY:

1901,02-16

FROM : KOPPERS INDUSTRIES, INC. .

Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

# Industrial Source Control Division Statement of Non-Discharge

Company Name:	Koppers Industries, Inc.
Facility Address:	7540 NW St. Helen's Rd
	Portland, OR 97210
Telephone Number:	503-286-3681
I certify under penalty of law	that for the year: 2001
	RICAL PROCESS WASTEWATER was discharged to the City ewerage system.
☐ Yes ☐	No Non-Categorical Process Wastewater was discharged to the City of Portland's sewerage system. (Please mark one).
	ative methods of eliminating all wastewater generated from my ses in compliance with all applicable City, State and Federal laws and
wastewater or non-categori	g this statement I am certifying that, as of this date, only domestic ical process wastewater is discharged to the City's sewer system. I am ant penalties for submitting false information, including the possibility knowing violations.
Authorized Official Signatur	e: As trace
Title:	Plant Manager  Felsermy 15, 2001
Date:	February 15, 2001

# ENVIRONMENTAL SERVICES



Water Pollution Control Laboratory 6543 N. Burlington Ave., Porlland, Oregon 97203-5452 (503) 823-5600

March 30, 2000

Amos Kamerer Koppers Industries 7540 NW St. Helens Hwy. Portland, OR 97210

RE: Facility Inspection of March 8, 2000.

Dear Mr. Kamerer:

Thank you for your time and cooperation during the recent inspection of your facility. It was apparent from the inspection that Koppers is in compliance with the conditions of its NPDES permit. The City of Portland appreciates your efforts to minimize stormwater pollution.

As was mentioned during the inspection, it is recommended that improved spill containment measures be implemented at the lube and fuel storage area that would prevent any spilled materials from entering the nearby stormwater lift station.

If you have any questions regarding this letter you can call me at 823-7885.

Sincerely

John Holtrop

Industrial Stormwater Section

Ih Holings

(C; J. Dietz, K-1650

T. Self, K-1800

M. Cilley, Strekwey

Mark, did you find Any info
on the containment pollets of

Amos 4/10/00

285 3681



Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

July 29, 1999

Amos Kamerer Koppers Industries Inc. 7540 NW St. Helens Rd. Portland, OR 97229

RE: Facility Inspection of June 23, 1999.

Dear Mr. Kamerer:

Thank you for your time and cooperation during the recent inspection of your facility. There were no issues requiring attention noted during the inspection and Koppers appears to be doing a good job of complying with the conditions of its NPDES permit. The City of Portland appreciates your efforts.

Sincerely

John Holtrop

Industrial Stormwater Section

CC: J. Pictr

F.18 - 3 1859

KOPPERSINDS, INC. **PORTLAND OR** 



Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

July 6, 1998

Amos Kamerer Koppers Industries 7540 NW St. Helens Hwy. Portland, OR 97210

RE: Facility Inspection of June 23, 1998.

Dear Mr. Kamerer:

Thank you for your time and cooperation during the recent inspection of your facility. Koppers appears to be doing a good job of managing potential pollutants on site and preventing their discharge to the storm sewer. The City appreciates your efforts to minimize stormwater pollution. If you have any questions you can call me at 823-7885.

Sincerely

John Holtrop

Industrial Stormwater Section

(C', T, Self, 1-1800

RECEIVED

415 9 7 **1998** 

KOPPERSINDS.,INC. PORTLAND.OR



# ENVIRONMENTAL SERVICES



Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

INDUSTRY NAME	INDUSTRIAL USER INSPECTION FORM  Express Industries  7540 NW St Helens Rd. Portland, OR	
INSPECTION TYP		
DESCRIBE THE P	ROCESS(ES)/OPERATION(S) INSPECTED:	**************************************
		······································
PRETREATMENT	SYSTEM: CONDITION & OPERATION COMMENTS good needs improvement	
☐ Clarifier	1 Deschare 4	100000
☐ Oil & Water Sep	parator 🗆 🗆 Wate - 1	
☐ pH adjustment		
□ Other		
POINT(S) OF COM	ADI JANCE:	•
LOCATION/	•	,
	good needs improvement	mlesson
1.		
3.	o of poersuete	arev.
RECORDS REVIEW:	□ ASPP	
PROCESS 1. Aud / Filos 2.	and the state of the state of the state of the state of the state of the state of the state of the state of the	
3.		
GENERAL INSPE	CTION NOTES:	Fil will
Koffen	CTION NOTES: Vill se receive Pencel Peter Long view	-17 WW
profile	andle Any Longo / - Proposing to Gentle / see	merica .
- Loppers	will Stop Handley Creosote of Refined Tars at	PDX facility
FOLLOW-UP ACT	TION(S): DUE DATE(S	)
1. ///	1 No pour - up neusus	
3.		
ECTOR(S):	4100 Kosenly DATE: 3-21-48	REVIEWED BY
	DATE:	Industrial Pretreatment Supr
JSTRY:	T.S. EMINEXER (print)	CITY USE ONL
	(signature) DATE: 3/21/98	City OSE ONE

Tuaci Self K-1800 Pgh.

for your files. Ames 10:57



Plant Menager

Koppers Industries, Inc. 7540 N.W. St. Helens Road Portland, OR 97210-3863

> Telephone: 503-286-3681 Fax: 603-285-2831

June 17, 1997

Mr. John Holtrop **Industrial Stormwater Section** City of Portland **Environmental Services** 6543 N. Burlington Ave. Portland, Or. 97203-5452

Dear Mr. Holtrop,

cc: Elliot Zais, DEQ

W. E. Swearingen, KII

This is to acknowledge receipt of your May 19, 1997 letter and to advise you that we have ceased using the cleaning agent in the plant, as requested.

Also, we have established a log for documentation purposes, covering the inspection of our oil separator, rain drains and sumps in the plant. A copy is attached.

If you have any questions you can call me at any time.

mos S. Kamerer

# Oil Separator, Rain Drain & Sump

# Inspection Log

Location:		Condi	tion;
Oil Separator	Date Inspected	Satisfactory	Cleaned
Rain Drains			- · · · · · · · · · · · · · · · · · · ·
Front "Outfall"			
Front Parking Lot (4")			***************************************
Front Parking Lot (6")			
Center Roadway	V-00		
Hot Oil Area			
Melter Area			
Back Roadway			
T-68 Area			
Sumps	·		
Boiler House		-	
Creosote Unloading			
Track Five			
New Pitch Building			
T-67			******



Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

May 19, 1997

RECEIVED

Amos Kamerer Koppers Industries Inc. 7540 NW St. Helens Rd. Portland, OR 97210

MAY 72 1997

KOPPERS INDS., INC. PORTLAND, OR

RE: Facility Inspection of May 15, 1997.

Dear Mr. Kamerer:

Thank you for your time and cooperation during the recent inspection of your facility. There were several items noted during the inspection that need to be addressed.

- 1. There are currently at least two types of washing operations taking place at the facility. It is understood that the purpose of the washing is to remove pencil pitch dust that accumulates on trucks and loaders and that this water then would be treated in the same manner as stormwater at the facility. This type of discharge is not covered by your current NPDES permit. I contacted DEQ and they feel as does the City that this type of activity would produce a waste stream similar to that that is covered by your permit and that the activity can continue so long as no cleaning agents or chemicals are used in the washing process. It is felt that cleaning agents might cause an increase of the level of suspected pollutants at the site, in the stormwater discharge. Your current NPDES permit is due to expire November 30, 1997. At that time you should request that DEQ add washing to the activities that are covered by your permit.
- 2. It is recommended that any site maintenance or inspections in the form of sweeping, or catch basin and separator cleaning be documented.

Please respond in writing by June 20, 1997 that the use of cleaning agents will be discontinued. If you have any questions you can call me at 823-7885.

Sincerely.

John Holtrop

Industrial Stormwater Section

CC: Elliot Zais, DEO

Cleaner and Remover

SYODOCI BOPPETIN CHEMCOA 1035-A

GENERAL DESCRIPTION:

CHEMCOA 1035-A combines the gentleness and safety of citrus based cleaners with the high solvency of petroleum based products. CHEMCOA 1035-A is safe on painted\* and unpainted surfaces for the removal of asphalt as well as the cleaning of parts and industrial equipment.

# APPLICATION:

CHEMCOA 1035-A can be used undiluted for difficult cleaning applications. It also forms an emulsion with water for general use cleaning. CHEMCOA 1035-A is a powerful but safe cleaning solvent.

# PROPERTIES:

Emulsification Rapid 7.8 Wetting . Excellent Flash Point 147 degrees F Appearance Clear, Orange Liquid Citrus Density . . . 7.31 1bs./gal.

# CAUTIONS:

May be harmful if swallowed. Causes irritation. Keep out of reach of children DO NOT take internally. .. Combustible - DO NOT store or use near open flame.

### PACKAGING:

Available in 30 or 55 gallon steel drums. F.O.B. CHEMCOA Plant - Portland, Oregon

While CHEMCOA 1035-A is safe on most painted surfaces the color fastness of the paint should be checked before beginning cleaning process.

rago a una tatuat na sala sala perminarkan kata neonga permita tata permitan kan mangalarkan mengaban kengapak

MCOA

	. !	1	MCOA	3		150	28887		P.0
						СНЕМСО	A 1035-A		
Mater	ial	Safety	Data	Sheet		QUICK IDENTIFI Common Marne: (L	BR Jeed on lebet and lik	1)	
		CSITA's thesant Communication to		<b>i.</b>			· · · · · ·	,	·
ECTION 1 -					<del></del>				
กบโรตเบาตร์ การ	Ch	mical Corp	oration of	America					
diess	25	5 S.E. 9th	Avenue			Emergancy Telephone No.	(503) 232	?-3334	
y, Store, ZAP	Poi	tland OR	97202			Other Information Calls	(503) 232	3334	- <b>-</b>
nuture of Person spansible for Preps	ration (	Optional)				Dare Prepatod	9/25/91,	Rev1sed	05/23/
CTION 2 -	HĄZ	ardous ing	REDIENTS/I	DENTITY					
zardous Componer	nt(s) (c)	emical & common nam	ne(s)	% (oyslonal)	O3HA PEL	ACGIH TLY	Other Exposur Limits	e CA NO	
etroleum	Нус	rocarbon			500 ppm	200 pps	TLV/STE	L 6474	2-88-7
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CTION 2 I	- J	terr e cite	MICAL CUA	D A CTENISTI			<del></del>		
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ing 350°	- 30	57° F.		Specifi	(H <sub>1</sub> O = I)	0.76	Pressure (mm 1)	2.2	
		Vapor Density (A	Mr=1) 5.3						
ally Evolus	111	ble		Reactiv Water	rity in No	ne			
Mance Mor Clear		ellow Liqui		Molting	Unkt	nown		3,11	
	+			VOOT FOINT	Ollai	TOWE .			
CTION 4 - F	IRE	& EXPLOSIO	N DATA						
147° N.	c	Method Used C.	o.c.	Florintable Limits in Air % by Volum		1.0	UEL Upper 7.	0	
Ignition Un	akno		Britneulcher	Water epray					
al Fire	Do	not use a d						, <del></del>	nzaduci
ing Procedures									
al Fire and		hters shoul							
sion Hazards		ol fire-exp	osed conti	iners, sur	rounding	equipmen	I and str	uctures v	ith
	Wa	ter.							
	7		<del></del>						
	T								
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· ·	11	EMCOA	1 7828887	Р.
SECTION 5 - I	PHYSICAL H	AZARUS (REACTIVITY DATA)	CHEMCOA 1035-A	
Stabilly Unitable []	Conditions to Avoid	High heat and open flames		
Incompatibility (Materials to Avoid)		ng materials.		
Hazardeus Decemposition Produc		monoxide, carbon dioxide and	unidentified organics.	
		onditions Avoid None known.		
SECTION 6 - I	ILALTH HA	ZARDS		
i. Acute (Inunediate) Eye. & pulm	onary irri	tation. 2. Chronic (Delayed Effect)	None reported	
Signs and Symptoms of Exposure	da   - 1	, dizziness and drying of skin	n. Mists irritate eyes, mucous	
membranes	and upper	respiratory tract.		
Medical Conditions Go Aggreeated by Exposur		known.		
	: i			
Chamical Listed an Car or Potential Carolnogen			A.R.C. Yes D OSHA Yes D Tonographs No Q No Q	
Emergency and Plast Aid Procedures	If over-e	xposure occurs, follow proced	ures outlined below:	
	, Inhaluton Rèmove vi	ctim to fresh sir. Administer	oxygen. Consult physician.	
ROUTES \ 3			ation persists, consult physician	١.
Ur ) -			. Launder clothes before reuse.	
/ -	Januina		ard, Immediately consult physicis	
SECTION 7 - S	· . 1	CAUTIONS AND SPILL/LEAK PROCE		
recentlons to be Taken I flaudling and Storage		in a cool, dry place with add		er
closed	when not i	n use.	·	
recoulions Emp	ty contain	ers of this material contain i	residue. Observe all hazard pract	ices
for empty	containers	. Do not weld on or cut empty	y containers.	
tups to be Taken in Car Interial is Released or S		nate sources of ignition. Con	ntain apill with a non-combustibl	. B
absorbant,	and place	in drums for disposal. Do no	or discharge into sewer system.	
Verso Disposal Inthods (Consult federa	il, sinte and freel reg	ulations) Dispose of wastes in co	ompliance with federal, state	
		and local regulations.		.,
KCTION 8 - SI	PECIAL PRO	TECTION INFORMATION/CONTROL	MEASURES	
espiratory Protection Specify Type)			grated, use NIOSH approved respir	ator
recomment	Loc	Mcchanical	Special Other	··
otectiva	r or Neopr	Dua	Goggles, eye wash fountain	
dier Protective othing or Hygiphical	<del>-: +</del>	eves and trousers.		,, , =
orkAlygicale Practices		oroughly after handling.		
APORTANT	• 1	equired information is unavailable, unknown,		



Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

September 1, 2008

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of August 2008.

There were no discharges into Doane Creek during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: <a href="mailto:turnertj@koppers.com">turnertj@koppers.com</a>

Sincerely,

T Laurner

Plant Superintendent

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KJ

S. Flynn, KI

# MONTHLY NPDES - DMR - WORK SHEET

Month & Year:

Aug-08

MONTHLY FLOW DATA

Gallons per pumping(all 6 tanks)

# of pump.

# of Days/Emer, Pump.

Emer. Gals.

Number of days during the month of Total Gals.

Average "slug" discharge per day

220,000

0

0

0

0

#DIV/0t

Days of the month:

SAMPLE TEST RESULTS

				•	-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<del></del> -				# of		LIMITS	<b>.</b>	80% of	I	ACTUA	L	ı
	, 1	2	3	4	5	6	7	8	9	10	11	12	Samples	min.	avg.	max.	Max.	min.	avg.	max.	unit
Temperature		Ι												n/a	п/a	n/a	n/a		#####		厂で
PH							L							6.0		9.0	n/a		#####		SU
Oil & Grease				]										0	10	15	12		#####		mg/L
Turbidity		<u> </u>	ļ																#####		טדע
Benzo(a)anthracene		┼─	<del> </del> -	-	-		<del> </del>	<u> </u>				-			13	22			#####		. ugi
Benzo(a)pyrene				i											26	39			#####		ugi
Benzo(b)fluoranthene															15	27			#####		ugi
Benzo(k)fluoranthene				Ţ											16	26			#####		ugl
Chrysene															20	27			#####		ugi
Dibenzo(ah)anthracene									L _						7	9			#####		ugi
Benzene									}						n/a	250			#####		ugi
BTEX		Ţ			L										nia	1000			#####		ugl
Cyanide														0	n/a	8.5			#####		ugi
Phenols			]				J							0.0	0.5	0.7	0.56		#####		mg/L

# QUARTERLY PAH SAMPLING

Date sample taken:

Test Results:

ug/L

Date sample taken:

Koppers002829

Test Results:

ug/L

( Must be less than ) 400 ugi

NATIONAL PURLUTANT DISCHARGE ELIMINATION SYSTEM RIPUEST

DISCHARGE MONITORING REPORT (DMR)

/2-16)

\*ERMITTEE NAME/ADDRESS (Include Facility Name/Incetion & Offerent)

Dihenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

2222 1 112 AM

JAME

Form Approved. OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Inch NAME	ude Facility Name/Loc	ation if Different)	NATIONAL PO DISCH	HUTANT DISCI ARGE MON (2-16)	HARGE ELIMINATION SY NTORING REPORT	STEM (NPDES) (DMR) (17-19)			OMB N	oproved. lo. 2040-	0004	
ADDRESS Koppers Inc. 7540 Nw Saint Helen		terim Permit Limi er MAO June 8, 20		-000077-9 BT NUMBER	DISCH	001 NARGE NUMBER	٠		Approvi	al expire	3 NO-9 I	-98
FACILITY LOCATION Northwest Terminal Multnomah County		9 November 30, 20	YEAR FROM 08 (20-21)	MO DA 8 0 (22-23) (24-	1 TO <b>08</b> 25) (26-27) (2	8 31 28-29) (30-31)	Check here if N			leting thi	s form	
PARAMETER (32-37)		(46-53)	ANTITY OR LOAD!I	,	(38-45)	IALITY OR CONCE (46-53)	NTRATION (54-61)		NO.	FREQUEN OF ANALYS	1 27	AMPLE TYPE
(02.01)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(82-63)	(64-68	1) (6	69-70)
Benzo(a)anthracene	SAMPLE MEASUREMEN	ī		j				-   -   11g/1		1/30	, G	GRAB
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Benzo(a)pyrene	SAMPLE MEASUREMEN	т						ug/I		1/30	, G	FRAB
Denizo(a)p) t ente	PERMIT REQUIREMEN	r			0.0	26	39					
Benzo(b)fluoranthene	SAMPLE MEASUREMEN	т						ug/l		1/30	G	RAB
Denzo(o)nantantnesse	PERMIT REQUIREMEN	т			0.0	15	27		1	[		
Benzo(k)fluoranthene	SAMPLE MEASUREMEN	т						ug/I		1/30	G	FRAB
Denzo(S)Moraniacae	PERMIT REQUIREMEN	т		<u> </u>	0.0	16	26					
	SAMPLE MEASUREMEN	т								1/30	G	SRAB
Chrysene	PERMIT REQUIREMEN	т		-	0.0	20	27	ug/L	1			
Dibenzo(ah)anthracene	SAMPLE MEASUREMEN	π						ng/L		1/30	G	RAB
Diverzo(an)antin acene	PERMIT REQUIREMEN	т			0.0	7	9	الها ا				
Benzene	SAMPLE MEASUREMEN	τ						ug/L		1/30	G	RAB
Bellevad	PERMIT REQUIREMEN	т			0.0	N/A	250					
NAME/TITLE PRINCIPAL EXECUTIVE	E OFFICER ICER	TTY UNDER PENALTY CE LAY THE R MY OLIECTION OR SUPERMES OCCALLED PERSONNEL FROPE D ON MY INQUIRTY OF THE PER	ATTHIS COCUMENT AND ALL A CN IN ACCORDANCE WITH A	SYSTEM CESICAL	NE PREPAREIT D TO ASSURE			TELEPI	IONE		DATE	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-tutal, Benzene, BTEX and Cyantde.

CC: M. Pronoid. City of Portland: T. Self. KI: S. Flynn, KI (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

Koppers002831

PERMITTEE NAME/ADDRESS (Incl) NAME	de Facility Name Locati	on il Different)	NATIONAL PO DISCH	LWTANT BISCH IARGE MON (2-16)	HARGE ELIMINATION SY INTORING REPORT	STEM (NPDES) (DMR) (17-19)		!	Form Ap	proved. 5. 2040-0	004 05 21	. 00
ADDRESS Koppers Inc. 7540 Nw Saint Helens	-	erim Permit Limit MAO June 8, 200	ts OR-	000077-9 IT NUMBER		001 IARGE NUMBER		,	vpprova	ii expires	υ <b>ວ-</b> 3 ι∙	-95
Portland, Or. 97210-3 FACILITY LOCATION Northwest Terminal	663 to	November 30, 20	YEAR	MO DA		14.0 37.3	Check here if	No Discharge				
Mulinomah County	47	430 / 101642		8 0 (22-23) (24-		8 31 28-29) (30-31)	NOTE: Read In	structions before	compl	eting this	form	
PARAMETER (32-37)		(3 Card Only) QUA (46-53)	NTITY OR LOADIN (54-61)	lG	(4 Card Only) QL (38-45)	JALITY OR CONCE (46-53)	NTRATION (54-61)		NO.	FREQUENT OF ANALYSIS	34	AMPLE TYPE
(32-01)		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(52-63)	(84-68)	36	69-70}
BTEX	SAMPLE MEASUREMENT			ļ				ug/L		1/30	G	RAB
DIEA	PERMIT REQUIREMENT				0.0	N/A	1,000	ug L				
TURBIDITY	SAMPLE MEASUREMENT							NTU		1/30	G	RAB
TORDIDITI	PERMIT REQUIREMENT						<u></u>					
Silver	SAMPLE MEASUREMENT							ng/L		1/30	G	RAB
Silver	PERMIT REQUIREMENT				0.0			agr				
Pentavalent Arsenic	SAMPLE MEASUREMENT							mg/L		1/30	G	RAB
- Cittaraicat Ai score	PERMIT REQUIREMENT				9.0							
	SAMPLE MEASUREMENT									1/30	G	RAB
Cadmium	PERMIT REQUIREMENT				0.0			mg/L			1.	
	SAMPLE MEASUREMENT									1/30	G	RAB
Copper	PERMIT REQUIREMENT				0.0			mg/L			T	
	SAMPLE MEASUREMENT									1/30	G	RAB
Mercury	PERMIT REQUIREMENT				0.6			mg/L			T	
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER ICENT	YUNGER PERALTY OF LAW THE WY NIE ROTTON OR SUPERIORS	AT THE DOCUMENTANDALLA	TACFMENTS NER	E PREPARED			TELEPHON	ĮΈ	[	DATE	
Leslie Hyde	TRAT CI PASED PERSON SUBMIT IAMAN	A UNICE PESSITY OF LAW THAT MY SIRRECTION OR SUPERMISSION OR SUPERMISSION OR SUPERMISSION OR SUPERMISSION OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PERSON OF THE PESSION OF THE PESS	LY GATHER AND EVALUATE TO CO. PERSONS WHICH WAS THE CAPO HOW LECOLATED FOR STATE OF	THE INFORMATION WAGE THE SYSTEM REMATION, THE IN ENCURATE AND MITTING FALSE IN MITTING FALS	SUBMITTED A OR THOSE FORMATION OCMPLETE TOSE TOSE TOSE TOSE TOSE TOSE TOSE T	6/1/Ja	unor	(503) 286-36	81	08	9	2
TYPED OR PRINTED	U.S.C. 3 or mexic	1001 AND 33 U.S.C. § 1319. (7: amang factoring of between 8 to	profes under these statutes ma onthis and 5 years.)	y include fines up to	\$10,000 and \$1GN	ATORE OF PRINCIPA FICER OR AUTHORI	ZED AGENT	AREA NUME			МО	DAY
OMMENTS AND EXPLANATION OF	ANY VIOLATIONS	(Reference all attac	hmenis bare) he following: Ber	ranio Josep	roanna Banga(a)	Dancoll	h) fluoron thene	Pancadr\d-	^AI	CI		

Dibenzo (ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

Koppers002832

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86/86

PERMITTEE NAME/ADDRESS (Inchriname ADDRESS Koppers Inc.		nd Different) rim Permit Limi:	DISCH	LLUTANT DISC: IARGE MON 12-18) 000077-9	LARGE ELIMINATION SYS	STEM (NPDES) (DMR) (17-19)			OMB N	pproved. o. 2040-0 al expires	004 05-31-98
7540 Nw Saint Helens		MAO June 8, 20		T NUMBER	aisch	ARGE NUMBER					
Portland, Or. 97210-30	663 to	November 30, 20			TORING PERIOD		Chack here if	No Mioskama			
FACILITY Northwest Terminal LOCATION			FROM 08	MO DA		MO DAY	-	=		1_41	
Multnomah County	474	130 / 101642	(20-21)	(22-23) (24-	25) (26-27) (2	8-29) (30-31)	NOTE: Read in	structions det	re comp	ienen ans	IOITI
PARAMETER		(3 Gard Only) QU/ (46-53)	NTITY OR LOADIN (54-61)	1G	(4 Card Only) QU (38-45)	ALITY OR CONCE (46-53)	NTRATION (54-61)		NO.	FREGUEN	CAMBILLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-53)	AMAINS	8 TYPE (69-70)
	SAMPLE MEASUREMENT									1/30	GRAB
Lead	PERMIT REQUIREMENT				0.0			mg/L			
Tio	SAMPLE MEASUREMENT			1				mg/L		1/30	GRAB
£ III	PERMIT REQUIREMENT				0.0						
Selenium	SAMPLE MEASUREMENT							mg/L		1/30	GRAB
Остерии	PERMIT REQUIREMENT				0.0	,					
Zinc	SAMPLE MEASUREMENT							mg/L		1/30	GRAB
2340	PERMIT REQUIREMENT				0.0						
	SAMPLE MEASUREMENT			•			<u> </u>	_			
	PERMIT REQUIREMENT	<u> </u>						_			
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	PERMIT REQUIREMENT							_	_		·
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NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER LEGER	Y UNCER PENALTY OF LAWYEN MY DIRECTION OR SUPERVISION	AT THIS BOOKUMENT AND ALL A ON WACCORDANCE WITH A	TTACHWENTS NES	E PREPARED TO ASSURE		,	TELEPHO	NE		DATE
Leslie Hyde	THAT OL BASED ( PERSON SUBMITI LAM AW	Y INCER PENALTY OF LAWTH WY DIRECTION OR SUPERVISE YOU FOR PERSCHILD, PROPE! IN MY INQUISY OF THE PER IS DIRECTLY RESPONSIBLE IED S. TO THE SEST OF MY AUBE THAT THERE ARE SIGN! MARE THAT THERE ARE SIGN! MO THE POSSIBLITY OF FINIS 1001 AND 30 MG. 5 1319. [P] UN EXPLORAGE OF THE PERSCHILD UN EXPLORAGE OF THE PROPERTY OF THE UN EXPLORAGE OF THE PROPERTY OF THE UN EXPLORAGE OF THE PROPERTY OF THE MARE THE PROPERTY OF THE MORE THE PROPERTY OF THE MORE THE PROPERTY OF THE MORE THE PROPERTY OF THE MORE MORE MORE THE	BY CATHER AND EVALUATE TO OR PERSONS WHO MAN FOR GATHERISO THE SIFO NOW-EDGE AND RESIDENT TRUE FOR SUB-FIXAT PERSUITES FOR SUB-FIXAT PERSUITES FOR SUB-FIXAT PERSUITES FOR SUB-FIXAT PERSUITES	ME INFORMATION LAGE THE SYSTEM RMATION, THE IN E. ACCURATE, AND MITTING FALSE IN	SUBMITTED.  1. OR THOSE FORMATION.  FORMATION.	Hur	ner	(503) 286-3	681	08	9 2
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COMMENTS AND EXPLANATION OF A MA O of June 8, 2007. The in						nimana Rungo/l	Muaranthana				
Pibenzo(ah)anthracene, PAH3'-t				ren (m)mmm.	emonthy mental(2)	hleenet neusoff	ryanus ausuelli	, nenantajii	roi anti	icue, Ci	н <b>узепе,</b>

Koppers002833



Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

August 1, 2008

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of July 2008.

There were no discharges into Doane Creek during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: <a href="mailto:turnerti@koppers.com">turnerti@koppers.com</a>

Sincerely,

7007 0220 0002 2237 2521

T. J. Turner

Plant Superintendent

7007 0220 0002 2237 2514

CC

M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene,

CC: M. Pronold, City of Portland: T. Self, KI: S. Flynn, KI

PERMITTEE NAME/ADDRESS (Include Facility Name) Location of Different)

Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

EBY Even 3330 1 140 08)

7540 Nw Saint Helens Road

Portland, Or. 97210-3663

Northwest Terminal

Multnomah County

PARAMETER

(32-37)

Interim Permit Limits

Per MAO June 8, 2007

47430 / 101642

(3 Card Only) (46-63)

AVERAGE

to November 30, 2008

JAME

FACILITY

\_OCATION

ADDRESS Koppers Inc.

NATIONAL PULLUTANT DISCHARGE ELIMINATIUM SYSTEM (SPDES)

DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

TO

(4 Card Only)

(38-45)

MINIMERA

08

61

OR-000077-9

PERMIT NUMBER

YEAR | MO | DAY

7

(20-21) (22-23) (24-25)

UNITS

FROM

QUANTITY OR LOADING

(54-81)

MAXIMUM

N8

861

DISCHARGE NUMBER

YEAR MO DAY

(26-27) (28-29) (30-31)

7 31

**QUALITY OR CONCENTRATION** 

IGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

/48-53}

AVERAGE

Koppers002835

Form Approved.

Check here if No Discharge

(54-61)

MAXIMUM

NOTE: Read Instructions before completing this form

UNITS

OMB No. 2040-0004

Approval expires 05-31-98

FREQUENCY

ANATYSIS

(64-88)

N/A

1/7

1/7

1/7

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1/30

Otr

60

YEAR

PAGE

NUMBER

NO.

EX

(62-63)

08/01/2008

08:36

5032852831

KOPPERS

SAMPLE

TYPE

(69-70)

CALC

**GRAJ** 

GRAB

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DAY

DATE

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03/06

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PERMITTEE NAME/ADDRESS (Inc. NAME	uda Facility Nama/Lecali	to Y Different)	NATIONAL PO	LLUTANT DISCH IARGE MON (2-18)	ARGE ELIMINATION SYS	TEM (NPDES) (DMR) (7-19)	·		OMB N	pproved. o. 2040-00 al expires 0	
ADDRESS Koppers Inc. 7540 Nw Saint Helen		erim Permit Limi MAO Jone 8, 20		000077-9 IT NUMBER	OISCH	091 ARGE NUMBER					
Portland, Or. 97210-	3663 to	November 30, 20			TORING PERIOD	10 1 007	Check here if No	Discharge		•	
FACILITY Northwest Terminal LOCATION Multnomah County	4743	0 / 101642	FROM 08 (20-21)	MO DA 7 0 (22-23) (24-	1 TO 08	VIO DAI	NOTE: Read Instr	-	e comp	leting this f	ioma:
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(32-37)		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(65-63)	AMAI VOICE	TYPE (69-70)
	SAMPLE MEASUREMENT					·				1/30	GRAB
Benzo(a)anthracene	PERMIT REQUIREMENT				0.0	22	13	ug/L	ŀ	: : , .	
Вепло(а)ругене	SAMPLE MEASUREMENT							- cg/L		1/30	GRAB
Benzo(a)pyrene	PERMIT REQUIREMENT				0.0	26	39	ugi			
Benzo(b)fluoranthene	SAMPLE MEASUREMENT							ug/L		1/30	GRAB
Benzo(b) morantuene	PERMIT REQUIREMENT				0.0	15	27	. ugr			
Benzo(k)fluoranthene	SAMPLE MEASUREMENT					_		ug/L		1/30	GRAB
Denzo(k)staticalitache	PERMIT REQUIREMENT				0.0	16	26				
Characa	SAMPLE MEASUREMENT									1/30	GRAB
Chrysene	PERMIT REQUIREMENT				0.0	20	27	ug/L			
Dibenzo(ah)anthracene	SAMPLE MÉASUREMENT							ug/L		1/30	GRAB
Dinental and arene	PERMIT REQUIREMENT				0.0	7	. 9	. ug/L			
Benzene	SAMPLE MEASUREMENT	·						ug/L		1/30	GRAB
Denvene	PERMIT REQUIREMENT				0.0	N/A	250	] """			
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	BASED ( PERSO)	PROFES IN MY INCLUMY OF THE PERS IS CORECTLY RESPONSEILE	ON OR PERSONS WHO MAN ON CATHERING THE INFO	AGE THE SYSTEM RUATION, THE EX	CR THOSE PORVATION		, (5	03) 286-36	81		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

AREA

NUMBER

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

YEAR

Lesiie Hyde

TYPED OR PRINTED

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PERMITTE NAME	E NAMEJADDRESS (Include Facility N	mellocation (FOMerent)	DISCHARGE MONITORING REPORT (DMR)	Approved: No: 2040-0004 oval expires 05-31-
ADDRESS	Koppers Inc.	Interim Permit Limits	OR-000077-9 001×	CAM GYPHES CYL-21.
.,,,,,,,,,,	7540 Nw Saint Helens Road	Per MAO June 8, 2007	PERMIT NUMBER DISCHARGE NUMBER	
• :	Portland, Or. 97210-3663-	to November 30, 2008	MONITORING PERIOD MCheck here if No Discharge	<u> </u>
FACILITY	Northwest Terminal		YEAR MO DAY F YEAR MO DAY	•
LOCATION	Multnemah County	47430 / 101642	OM 08 7 01 10 08 7 31 NOTE: Read instructions before con (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)	mplating this form
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PARAMETER (32-37)		(3 Card Only) QUA (46-53)	NTITY OR LOADIN (54-61)	G '	(4 Card Only) QU (38-45)	ALITY OR CONCE (46-53)	ITRATION (54-61)		NO.	FREQUENCY	SAMPL
(32-31)		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(82-63)	ANALYSIS (64-88)	(69-70
	SAMPLE MEASUREMENT							_		1/30	GR/
BTEX	PERIAIT REQUIREMENT				<b>0.0</b>	N/A	1,000	ng/L		:	1 - 464 . 1 - 464 . 1 - 464 .
THE DIDITY	SAMPLE MEASUREMENT	·	·					NTU		1/30	GR
TURBIDITY	PERMIT REQUIREMENT							NID			
Silver	SAMPLE MEASUREMENT		-							1/30	GR
Silver	PERMIT REQUIREMENT				0.0			mg/L			
Pentavalent Arsenic	SAMPLE MEASUREMENT							mg/L		1/30	GR
reniavalent Arsenic	PERMIT REQUIREMENT				0.0						
	SAMPLE MEASUREMENT					·				1/30	GR
Cadmium	PERMIT REQUIREMENT				0.9		-	mg/L			
Conner	SAMPLE MEASUREMENT		,							1/30	GR
Copper	PERMIT REQUIREMENT	•			0.0			mg/L			
	SAMPLE MEASUREMENT									1/30	GR
Mercury	PERMIT REQUIREMENT				0.0			mg/L			(
IAME/TITLE PRINCIPAL EXECUTIVI	E OFFICER ICERTS	CINCER PENALTY OF LAW THA	TTHIS DOCUMENT AND ALL AT IN IN A DECIREM WEEK A S	TPCHANNETS WE	RE PREPARSO D TO ASSURE		ا ر	TELEPHO	NE	D/	Œ
Leslie Hyde	THAFOLE BASED O PERSON SUBSTITI I AM ASA	FUNCER PENALTY OF LAW THAN AY DIRECTION OR SUPERVISION SUB-ED PESSONATE, PROPER IN MY SYDLIKY OF THE PERSO S CARECTLY RESPONSIBLE I ED IS, TO THE BEST OF MY MY AYS THAY THERE ARE SIGNAF NOT THAY THERE ARE SIGNAF NOT THAY THERE ARE SIGNAF OD AND SUB-CE, STAN, SPA um imprisonment of briven 6-co	LY GATHER AND EVALUATE T ON OR PERSONS WHO MAK FOR GATHER AND THE INFO OWLEDGE AND BELLER TRUI ICANT PENALTIES FOR BUBB AND EXPRESONMENT FOR SUB-	HE DECREATION AGE THE SYSTEM HAMICH THE L ACCURATE AN AFTING FALSE IN KOMING VIOLATI	M. OR THOSE UFORMATION DECOMPLETE LONG, SEE 19	Mun		503) 286-36 	81	08	8
TYPED OR PRINTED		1901 AND 33 U.S.C. 9 1313, 174 un imprisonment of between 8 co (Reference all attact		y include fines up	5 510,200 and OF	ATÚRE OF PRINCIPAL FICER OR AUTHORIZ	ED AGENT	REA NUMI	BER	YEAR !	10

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

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	E NAME/ADDRESS (Hall	ide Facüly Namsı£ocatio	on if Different)	NATIONAL PO DISCH	LLUTANT DISCI IARGE MON [Z-15]	HARGE ELIMBIATION SY ITTORING REPORT	STENI(NPDES) (DMR) (17-19)	· · ·		OMB N	pproved. lo. 2040-000 al expires.05	: 14 6 24 00
ADDRESS	Koppers Inc. 7540 Nw Saint Helens		rim Ýermit Limi MAO June 8, 20	ts OR-	000077-9 IT NUMBER		OD1 PARGE NUMBER		,	- - Andrina	ar expires.os	÷31-30
FACILITY LOCATION	Portland, Or. 97210-3 Northwest Terminal Multnomah County	٠	November 30, 20 130 / 101642	YEAR FROM 08 (20-21)	MO DA 7 0 (22-23) (24-	1 TO 08	WE CONT	Check here if No	_	э сотр	leting this fo	)FTN
	PARAMETER (32-37)	$\times$	(3 Card Only) QU/ (46-53) AVERAGE	ANTITY OR LOADIN (54-81) MAXIMUM	IG UNITS	(4 Card Only) QL (38-45) MINIMUM	JALITY OR CONCE (48-53) AVERAGE	NTRATION (54-81) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		SAMPLE MEASUREMENT						2000000	1		1/30	GRAI
	Lead	PERMIT REQUIREMENT				0.0			m.g/L			
	Tin	SAMPLE MEASUREMENT							mg/L		1/30	GRAI
	110	PERMIT REQUIREMENT				0.0			ling D			
	Selenium	SAMPLE MEASUREMENT							mg/L		1/30	GRAE
		PERMIT REQUIREMENT				0.0				ļ <u>:</u>		
	Zins	SAMPLE MEASUREMENT							mg/L		1/30	GRAE
-		PERMIT REQUIREMENT				0.0						
		SAMPLE MEASUREMENT									É	
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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I WHICH AND THE PENALTY OF A SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE

TEXT CHALLIFIED PERSONNEL PROPERTY CARLIES AND THE PROPERTY OF A STRUCKNESS AND THE P SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT AREA TYPED OR PRINTED NUMBER YEAR MO COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

CC: M. Pronoid. City of Portland: T. Self. KT: S. Flynn. KT (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

80

TELEPHONE

(503) 286-3681

DATE

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Koppers002838

PERMIT REQUIREMENT

Average "slug"

discharge per day

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ACTUAL

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max.

min.

Number of days

during the month of

LIMITS

max.

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9.0

15

22

39

27

26

27

9

250

1000

8.5

0.7

avg.

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15

16

20

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80% of

Max.

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n/a

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unit

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NTU

ugi

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ugl

mg/L

QUARTERLY PAH SAMPLING

MONTHLY NPDES - DMR - WORK SHEET

8

Emer. Gals.

Ω

10

Total Gals.

0

# of

min.

n/a

6.0

0

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0.0

MONTHLY FLOW DATA

SAMPLE TEST RESULTS

# of Dava/Emer. Pump.

٥

Date sample taken: Date sample taken:

Month & Year:

Gallons per pumping(all 6

220,000

Days of the month:

Temperature

PH

Oli & Grease

Benzo(a)anthracene

Benzo(a)pyrene

Benzo(b)fluoranthene

Benzo(k)fluoranthene

Chrysene

Dibenzo(ah)anthracene

Benzene

BTEX

Cyanide

Phenols

Turbidity

tanksi

Jul-08

# of pump.

0

**Test Results:** 

ug/L

Test Results:

ug/L

( Must be less than ) 400 ugl



Koppers Inc.

Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

July 1, 2008

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of June 2008.

There were no discharges into Doane Creek during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: <a href="mailto:turnertj@koppers.com">turnertj@koppers.com</a>

Sincerely,

T.J. Turner

Plant Superintendent

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

ADDRESS	Koppers Inc. 7540 Nw Saint Helens		erim Permit Limit MAO June 8, 200		-000077-9 IT NUMBER	DISCH	001 NARGE NUMBER		,	Approva	ai expires	UO-31	-98
FACILITY LOCATION	Portland, Or. 97210-3 Northwest Terminal Mulinomah County		November 30, 200 7430 / 101642	FROM 08 (20-21)	MO DA 6 0 (22-23) (24-	1 TO 08 25) (26-27) (2	6 30 28-29) (30-31)	Check here if No NOTE: Read Instru	_	e comp	eting this	i form	
	PARAMETER (32-37)		(48-53)	NTITY OR LOADIN (54-61)	,	(38-45)	IALITY OR CONC (46-53)	(54-61)		NO.	FREQUEN OF ANALYSI	1 42	WPLE TYPE
L	,		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MUMIXAN	UNITS	(62-63)	(64-68)	(6	i9-70)
Ì	FLOW	SAMPLE MEASUREMENT			- Conn					0	· N/A	C	ALC
SEE (	COVER LETTER	PERMIT REQUIREMENT			GPD								
TE	MPERATURE	SAMPLE MEASUREMENT							°		1/7	G	RAB
P.E.	INFERATURE	PERMIT REQUIREMENT				N/A	N/A	<25deg C.					
	РН	SAMPLE MEASUREMENT	·						av.		1/7	G	RAB
_	rn	PERMIT REQUIREMENT				6.5	N/A	8.5	SV				
OI	L & GREASE	SAMPLE MEASUREMENT				-			mg/L		1/7	G	RAB
) UI	L & GREASE	PERMIT REQUIREMENT				0.0	10	15					
		SAMPLE MEASUREMENT									1/30	G	RAB
	PHENOLS	PERMIT REQUIREMENT			·	0.0	9.5	0.7	mg/L				
	CH I NEDE	SAMPLE MEASUREMENT									1/30	G	RAB
	CYANIDE	PERMIT REQUIREMENT				0.0	N/A	8.5	ug/L				
	POLY	SAMPLE MEASUREMENT							ng/i		Qtr	G	RAB
1	AROMATIC DROCARBONS	PERMIT REQUIREMENT				0.0	Ń/A	400	ug/L				
NAME/TITL	E PRINCIPAL EXECUTIVE	OFFICER ICERTIF	Y UNDER PENALTY OF LAWYTHAT MY DIRECTION OR SUPERVISIO	THE DOCUMENT AND ALL A NIN ACCORDANCE WITH A	ITACHMENTS WER SYSTEM GESIGNET	E PREPARED TO ASSLERE			TELEPHON	ŧΕ		DATE	<del></del>
	Leslie Hyde	BASED PERSO: SLBUIT LAXAM	MY DIRECTION OR SUPERVISION INLIFIED PERSONNEL PROPERL OM MY INMULRY OF THE FERSE SS DIRECTLY RESPONSILE F TED IS, TO THE BEST OF MY KM WARE THAT THERE ARE SIGNIFI	LT CAIREA AND EXCLARE AND REASONS WHICH MAN OR GATHERING THE USFO DVAEDGE AND BELIEF, TRU CANT PENALTIES FOR SUB	LAGE THE SYSTEM PRINTEDIN, THE IN THE ACCURATE AND MITTING FALSE IN	A OR THUSE FORMATION COMPLETE FORMATION	300	mes	03) 286-36 ]	81	08	7	01.
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	S AND EXPLANATION OF, of June 8, 2007. The in				uzc(a)anth	racene, Benzo(a)	pyrene, Benzo(			crant	iene, C	hryse	

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-15)
(17-19)

Koppers002841

PERMITTEE NAME/ADDRESS (Unclude Facility Name/Location if Different) NAME

PERMITTEE NA NAME	ME/ADDRESS (tincto	de Facility Name/Locatio	an if Düferent)	DISCH	LLUTANT DISCH IARGE MON (2-18)	HARGE ELIMINATION SYS	STEM (NPDES) (DMR) (17-19)		(	OMB No	proved. . 2040-000 l expires 00	4 5-31-98
. 1001120	ppers Inc.		erim Permit Limi		000077-9		001		•	-iphio4c	i axpiios o	
	0 Nw Saint Helens		MAO June 8, 20	· ———	IT NUMBER	DISCH	ARGE NUMBER			•		
Por	tland, Or. 97210-3	663 to	November 30, 20			TORING PERIOD		Check hare if No I	liechame			
FACILITY Nor	thwest Terminal			FROM 08	MO DA		WIO CAL				- 49 Aluba dan	
Mul	Itnomah County	4743	0 / 101642		(22-23) (24-		28-29) (30-31)	NOTE: Read Instruc	citons ceron	e compi	eung was to	TSTT1
PAR	AMETER		(3 Card Only) QU/ (46-53)	ANTITY OR LOADIN	IG	(4 Card Only) QU	ALITY OR CONCE			NO.	FREQUENCY OF	SAMPLE
	32-37)	$\sim$	AVERAGE	MAXIMUM	UNITS	(38-45) MINIMUM	(48-53) AVERAGE	(54-61) MAXIMUM	UNITS	EX (32-63)	AMALYSIS (64-68)	TYPE (69-70)
			MEIOGE	MANAGON	DIANIE	SUL SURIORS	AVEIVICE	MACHINOM	DIVIES	102 33,	(04-08)	foastol
D(2)	N-47	SAMPLE MEASUREMENT					·				1/30	GRAB
Penze(a	)anthracene	PERMIT REQUIREMENT				0.0	22	13	ug/L	)		
		SAMPLE									1/30	GRAB
Benza	(а)ругепе	MEASUREMENT			ł				ug/L	<u> </u>	1/50	0202
.:	(-)[1	PERMIT REQUIREMENT				0.0	26 👊	39				
		SAMPLE MEASUREMENT				, .					1/30	GRAB
Senzo(b)	fluoranthene	PERMIT REQUIREMENT				0.0	15	27	ug/L			
P (IV		SAMPLE MEASUREMENT				· .			ug/L		1/30	GRAB
Benzo(K)	fluorantheue	PERMIT REQUIREMENT				0.0	16	26				
		SAMPLE MEASUREMENT	·				-				1/30	GRAB
Ch	rysene	PERMIT REQUIREMENT				0.0	20	27	ng/L			
	, h) + k	SAMPLE MEASUREMENT									1/30	GRAB
DiDenzo(8	ab)anthracene	PERMIT REQUIREMENT				0.0	7	9	ug/L			
		SAMPLE MEASUREMENT							Theorem 1		1/30	GRAB
	enzene	PERMIT REQUIREMENT				0.0	N/A	250	ug/L			
NAME/TITLE PR	NAME/TITLE PRINCIPAL EXECUTIVE OFFICER INCERTING DIRECTION OF RUPERVISION			THUS DOCUMENTAND ALL A	TACHEROS NES	E PREPARED			TELEPHO	NE	0/	TE

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Henzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

(503) 286-3681

NUMBER

Leslie Hyde

TYPED OR PRINTED

Koppers002842

08

YEAR

7

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DAY



PAGE 821

June 3, 2008

Koppers Inc.

Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the mouth of May 2008.

There were no discharges into Doane Creek during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: <a href="mailto:turnertj@koppers.com">turnertj@koppers.com</a>

Sincerely,

T. J. Turner

Plant Superintendent

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

May-08

MONTHLY FLOW DATA

Gallons per pumping(all 6

tanks) # of

# of pump. # of Days/Emer. Pump.

Emer. Gals. Total Gals.

Number of days during the month of

Average "slug" discharge per day 8802/E8/98

14:07

220,000

0

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0

#DIV/0!

Days of the month:

SAMPLE TEST RESULTS

													# of		LIMITS	<u> </u>	80% of	A(	TUAL		ŧ
	1	2	3	4	5	6	7	8	9	10	11	12	Sarrales.	min.	avg.	max.	Max.	min.	avg. 1	nax.	unit
Temperature						<u> </u>								n/a	n/a	n/a	nla		####		
PH														6.0		9.0	n/a	#	####		
Oil & Grease		(			[,									0	10	15	12	#	####		mg/L
Turbidity																		#	####		טדא
Benzo(a)anthracene					<del>                                     </del>										13	22			####		lgu
Benzo(a)pyrene															26	39		#	####		lgu
Benzo(b)fluoranthene		1													15	27		#	####		ugi
Benzo(k)fluoranthene							l								16	26		#	####		ugi
Chrysene			Ī												20	27		#	###		ugl
Dibenzo(ah)anthracene		T													7	9_		#	####		ugl
Benzene															n/a	250		#	####		пāј
BTEX				I		1									n/a	1000		#	4444		ugi
Cyanide														0	n/a	8.5		#	####		ugi
Phenois														0.0	0.5	0.7	0.56		####		mg/L

### QUARTERLY PAH SAMPLING

Date sample taken:

Test Results:

ug/L

Date sample taken:

Test Results:

ug/L

(Must be less than) 400 ugl

PERMITTEE NAME/ADDRESS (INCK NAME ADDRESS Koppers Inc. 7540 Nw Saint Helens	ccation if Offiarant) Interim Permit I Per MAO June 8	Dis						C	JMB No	oprovad. o. 2040-0 al expires	1004 : 05-31	. <del>-</del> 98	
FACILITY Northwest Terminal Multnomab County		to November 30 47430 / 101642	7E/ FROM 05 (20-1	AR MO DA B 5 0 21) (22-23) (24-	1 TO 08	MO DAY 5 31 28-29) (30-31)	Check here if		•	э сапрі	eting this	i form	
PARAMETER		[3 Card Only) (48-53)	QUANTITY OR LOA (54-51)	DING	(4 Card Only) QL (38-45)	JALITY OR CONC (48-53)	ENTRATION (54-61)			NO. EX	FRECUEN OF	CY s/	AMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM		STINL	(62-63)	ANALYS (64-68)	IS   '	TYPE 39-70)
FLOW	SAMPLE MEASUREME	INT								0	N/A	7	CALC
SEE COVER LETTER	PERMIT REQUIREMEN	NT		GPD									
	SAMPLE MEASUREME								0		1/7	C	RAB
TEMPERATURE	PERMIT REQUIREMS	TN			N/A	N/A	<25deg C		С		,	1	*
	SAMPLE MEASUREME	ENT									1/7	G	RAB
PH	PERMIT REQUIREME	ти			6.5	N/A	8.5		SU				-
OH A CREAGE	SAMPLE MEASUREME	NT							mg/L		1/7	G	RAB
OIL & GREASE	PERMIT REQUIREME	NT			0.0	10	15		mg.r.				
DAMPOL C	SAMPLE MEASUREME	ENT									1/30	G	RAB
PHENOLS	PERMIT REQUIREME	ENT			0.0	0.5	0.7		mg/L		!		
CYANIDE	SAMPLE MEASUREME								A		1/30	G	RAB
CYANIBE	PERMIT REQUIREME	INT			0.0	N/A	8.5		ng/L				
POLY	SAMPLE MEASUREME										Qtr	G	RAB
AROMATIC HYDROCARBONS	PERMIT REQUIREME	INT .			0.0	N/A	400		ug/L			1	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER INCENTIVE FEMALY OF LINET AND OFFICER UNDER MY DIRECTION OF SUPERVISIONS			WITHAT THIS EGGLIVENT AND. ERVISION IN ACCORDANCE WIT	ALLATTACHMENTS WEE	E FREPARED TO ASSURE			T	LEPHON	E		DATE	
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Leslie Hyde  Leslie Hyde  Leslie Hyde  USC, 1001 AND 3 USC, 2 1919. Pasa  Typed OR PRINTED  Communication of the position of the past of t			ir ring werd in magentent f 13. 'Parades inder fera stati arn 6 morths and 5 years)	tes may include fines up :	SIGN. OF	ATURE OF PRINCIPA FICER OR AUTHORA		AREA CODE	NUMB	ER .	YEAR	МО	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference ell attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cynnide.

CC: M. Pronold, City of Portland: T. Self, KI: S. Flynn, KI (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-18)
(17-19) OR-000077-9

กา

YEAR MO DAY

- 5

08

FROM

001 DISCHARGE NUMBER PERMIT NUMBER MONITORING PERIOD

YEAR MO DAY

5

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

06/03/2008

14:07

Check here if No Discharge

NOTE: Read Instructions before completing this form

Multnomah County	47430	) / 101642	(20-21)	(22-23) (24-		28-29) (30-31)	NOTE: Read Instr	TEGOLIS DRIOIS	e comp	istilă nie lo	
PARAMETER		(3 Card Only) QUA (46-53)	ANTITY OR LOADII (54-61)	NG	(4 Card Only) QU (38-45)	ALITY OR CONCE (48-53)	NTRATION (54-61)		NO.	FREQUENCY OF	SAMPLI
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-83)	ANALYSIS (64-68)	(69-70
	SAMPLE MEASUREMENT	·								1/30	GRA
Benzo(a)anthracene	PERMIT REQUIREMENT				0.0	22	13	ug/L			
	SAMPLE MEASUREMENT							ug/L		1/30	GRA
Benzo(a)pyrene	PERMIT REQUIREMENT				0.0	26	39	ligit			
D (h) Sirraya athan a	SAMPLE MEASUREMENT									1/30	GRA
Benzo(b)fluoranthene	PERMIT REQUIREMENT				0.0	15	27	ug/L			
Danie (Iv) (Ivoranthore	SAMPLE MEASUREMENT							ng/L		1/30	GRA
Benzo(k)fluoranthene	PERMIT REQUIREMENT				0.0	16	26	l "Br			
	SAMPLE MEASUREMENT									1/39	GRA
Chrysene	PERMIT REQUIREMENT				0.0	20	27	ug/L			
Dil man (a b) and hymnor	SAMPLE MEASUREMENT							a/I		1/30	GRA
Dibenzo(ab)anthracene	PERMIT REQUIREMENT				0.0	7	9	ug/L			
_	SAMPLE MEASUREMENT									1/30	GRA
Benzene	PERMIT REQUIREMENT				0.0	N/A	250	ug/L			
IAME/TITLE PRINCIPAL EXECUTIVE	OFFICER ICERTIFY	UNCERPENALTY OF LAWTHA	AT THIS COCUMENT AND ALL A	ATTACHMENTS WEI SYSTEM DESIGNE	RE FREPARED O TO ASSURE			TELEPHON	E	DA	ΓĒ
Leslie Hyde	THAT CLA BASED OF PERSONS SLEWHTE I AM AWA INCLUCA	UNCER PENALTY OF LAW THW Y DIRECTION OR SLYSEN/SIG LLTED PENSONNEL PROPER N MY INDUINTY OF THE PERS S DIRECTLY PRESPONSIBLE ED IS, TO THE BEST OF MY MO INC. THAT THEREARE SIGNIF OF THE POSSIBILITY OF PINE	RLY CATHER AND EVALUATE ON OR PERSONS WHO VAI FOR GATHERING THE IMPO LOWLEDGE AND BELIEF TRU PICANT PENALTIES FOR SUB AND IMPRISONMENT FOR T	THE INFORMATION  LAGE THE SYSTEM  REACTION, THE B  REACTION THE B  LYTTING FALSE IN  KNOWING VIOLATION	ASUBMITTED.  M. OR THOSE  MFCRAVATION  OCCMPLETE  FORMATION  ONS. SEE 18	Ture of Principal	EXECUTIVE	503) 286-36	81	08	6 0:
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
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CC: M. Propold, City of Portland; T. Self, KI: S. Flynn, KI

05/07

PERMITTEE NAME/ADDRESS (Incli NAME	DISCH	ARGE MON (2-16)	HARGE ELIMINATION SY IITORING REPORT	(DMR) (17-19)			0	N BMC	pproved o. 2040- al expire	-0804	1-98			
ADDRESS Koppers Inc.			n Permit Limi		000077-9		001 IARGE NUMBER					•		
7540 Nw Saint Helens			AO June 8, 20	· · · · · · · · · · · · · · · · · · ·	IT NUMBER	DISCI	ANGE NUMBER							
Portland, Or. 97210-3	1663	to No	vember 30, 20			TORING PERIOD		Check hare if	No Dien	harne				
FACILITY Northwest Terminal				FROM 08	MO DA		1310	•				,		
LOCATION Multnomah County		47430	7 / 101642		(22-23) (24-	<u> </u>	5   31   28-29) (30-31)	NOTE: Read Ins	struction	ıs before	comp	ieting th	is form	i
PARAMETER		/p		ANTITY OR LOADIN	<u> </u>	(4 Card Only) QL	JALITY OR CONCE				NO.	FREQUE	NCY &	SAMPLE
(32-37)	$\perp$		(48-53)	(54-61)		(38-45)	(46-53)	(54-61)	1.		NO.	ANALYS	SES I	TYPE
		7	AVERAGE	MAXIMUM	UNITS	MUMINIM	AVERAGE	MAXIMUM	L	STIN	(82-83)	(64-68	3) (	(69-70)
	SAMPLE MEASUREM			!								1/30	)   (	GRAB
BTEX	PERMIT REQUIREM					0.0	N/A	1,000		ug/L				
TURBIDITY	SAMPLE MEASURE									עדע		1/30	) (	GRAB
TURDIDITI	PERMIT REQUIREM									1110				<del></del> .
	SAMPLE MEASUREM	JENT										1/30	E	GRAB
Silver	PERMIT REQUIREM	r IENT				0.0			_	mg/L				
	SAMPLE MEASUREM									m <i>al</i> 1		1/30	G	GRAB
Pentavalent Arsenic	PERMIT REQUIREM	IENT				0.0			]	mg/L				
	SAMPLE MEASUREM											1/30	G	GRAB
Cadmium	PERMIT REQUIREM					9.0				ng/L				
Copper	SAMPLE MEASUREM									a		1/30	G	GRAB
Соррег	PERMIT REQUIREM					0.0				ng/L				
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NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER	CERTFY CMD	JER FEMALTY OF LAW THA	ITTHIS COCUMENT AND ALL AT CHEM ACCORDANCE WITH A S	TACHUESTSWER	E FREFARED		$\overline{}$	TE	LEPHON	E		DATE	
	T	PLAT CUAL FIE BASED ON AN	ED PERSONNEL PROPER Y INDUSTRY OF THE PERS	OTHER COUVERT MODALLAT CH MACCORDA/CEVITH AS RLY GATHER AND EVALUATE TH ROM OR PERSONS WHO MAN FOR GATHERING THE INFORMAN HOM OR PERSONS WHO MAN FOR GATHERING THE INFORMAN	HE REGRESSION AGE THE SYSTEX CUSTORS THE IS	SUBMITTED. I, OR DICSE	10		(503)	286-368	R1			
Leslie Hyde	Š	EDUTTED IS  I DICOLUDIC  TO DI	I, TO THE BEST OF MY XN THAT THERE ARE SIGNIF HE POSSIBILITY OF FAE	MANUEL CE AND BELIEF, TRUE CANT PENALTIES FOR SUBL AND IMPRIBUSATENT FOR SI	ACCURATE AND INTENS FALSE IN INVESTIGATION	COMPLETE FCHMTION INS. SEE 18	COURT OF PRINCIPAL	EVENIENE	— j	-00 000	"	08	6	03
Leslie Hyde  Leslie Hyde  Low Printed State Control of the Control		where success is the second se	y inducta Ensa up o	\$10,050 end   SIGNA	FICER OR AUTHORIZ		AREA	MUDARA.	FR	VEAR	NO.	DAV		

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Per MIAO of June 8, 2007. The interim limits are referenced for the following: Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

YEAR WO

NUMBER

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NAME ADDRESS	Koppers Inc. 7540 Nw Saint Helens Portland, Or. 97210-3 Northwest Terminal	Road P	nterim Permit Limi Per MAO June 8, 20 to November 30, 20	DISCH	ARGE MON (2-18)  000077-9  IT NUMBER  MONI  MO DA  5 0	TORING PERIOD Y YEAR 1 TO 08	(DMR) (17-19) 001 HARGE MUNIBER MO DAY 5 31	Check here if No	( / Discharge	MB MA	oproved. o. 2040-0: al expires	05-31-	-98
	Multnomah County			(20-21) ANTITY OR LOADIN	(22-23) (24-) IG		28-29) (30-31) JALITY OR GONO						
	PARAMETER (32-37)	>>	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-81) MAXIMUM	UNITS	NO. EX (62-83)	FREQUENT OF ANALYSIS	S   '	MPLE YPE
		SAMPLE		- INATIVITIVI	Charles	Control Control	- AVEIVICE	- WIXXIIIOWI	UNITS	(32.33)	(64-68)	+	9-70) D A 73
	Lead	MEASUREME	NT						mg/L		1/30	+ 5	RAB
		PERMIT REQUIREMEN	NT .			0.0							
	Tin.	SAMPLE MEASUREME	NT						mg/L		1/30	G	RAB
1	Tia	PERMIT REQUIREMEN	NT			0.0			mg.L				
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	Selenium	PERMIT REQUIREMEN	NT .			0.0			mg/L				
		SAMPLE MEASUREME	TM						ng/L		1/30	GI	RAB
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

NO

YEAR

NUMBER

TYPED OR PRINTED



Tortelle 3/15/00

May 2, 2008

Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
fax 503 285 2831
www.koppers.com

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of April 2008.

There were no discharges into Doane Creek during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: turnerti@koppers.com

Sincerely,

T. J. Turner

Plant Superintendent

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

PERMITTEE NAME/ADDRESS (met NAME ADDRESS Koppers Inc. 7540 Nw Saint Helen	Inte	and Sifferent) erim Permit Limit MAO June 8, 200	DISCH	OLLUTANT DESC HARGE MON (2-16) -000077-9 IIT NUMBER		STEM (NPOES; (DMR) (17-12) 001 WARGE NUMBER		1	OMB N	pproved. lo. 2040- al expires	
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FLOW	SAMPLE MEASUREMENT			GDD.					0	N/A	CALC
SEE COVER LETTER	PERMIT REQUIREMENT			GPD							
TEMPERATURE	SAMPLE MEASUREMENT		·					C		1/7	GRAB
1EM EXATORE	PERMIT REQUIREMENT				N/A	N/A	<25deg C.				
PH	SAMPLE MEASUREMENT							su		1/7	GRAB
	PERMIT REQUIREMENT				6.5	N/A	8.5				
OIL & GREASE	SAMPLE MEASUREMENT							mg/L		1/7	GRAB
0,2 0 0,2,102	PERMIT REQUIREMENT				0.0	10	15				
PHENOLS	SAMPLE MEASUREMENT							mg/L		1/30	GRAB
PHENOLS	PERMIT REQUIREMENT				0.0	0.5	0.7	mg/L.			
CYANIDE	SAMPLE MEASUREMENT							ug/L		1/30	GRAB
	PERMIT REQUIREMENT.				0.0	N/A	8.5	-52		·	
POLY AROMATIC	SAMPLE MEASUREMENT							ug/L		Qtr	GRAB
HYDROCARBONS	PERMIT REQUIREMENT				0.0	N/A	400	-62			
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EP4 Form 3320-1 (10-96)	· · · · · · · · · · · · · · · · · · ·		CC: M. Prono		Portland: T. Self		KI		DA.	GF.	4

	PERMITTEE NAME/ADDRESS (Incl NAME ADDRESS Koppers Inc. 7540 Nw Saint Helen:	Lute	enë Diferent) rim Permit Limi MAO June 8, 20	ts OR-	HARGE MON 12-15 -000077-9 IT NUMBER		(DMR) (7-19) 001 ARGE NUMBER		. (	OMB N	oproved. 5, 2040-0 sl expires	004 05-31-	98
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	PARAMETER (32-37)		(46-53)	NTITY OR LOADIN (54-61)	iG	(38-45)	ALITY OR CONCE (46-53)	(54-€1)	7	NO.	FREQUEN OF ANALYSI	320	MPLE YPE
2008		SAMPLE	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(6!	9-70)
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May.	weder(a)antinaceite	PERMIT REQUIREMENT				0.0	22	13	l again				
Σ	Benzo(a)pyrene	SAMPLE MEASUREMENT							ug/L		1/30	G	RAB
	Denzo(a)pyrene	PERMIT REQUIREMENT				0.0	26	39		_			
		SAMPLE MEASUREMENT		-							1/30	GI	RAB
2831	Benzo(b)fluoranthene	PERMIT REQUIREMENT				0.0	15	27	ug/L				
5032852831	Benzo(k)fluoranthene	SAMPLE MEASUREMENT							ug/L		1/30	G	RAB
33	Denzo(k)/nooranthene	PERMIT REQUIREMENT				0.0	16	26	] "6,2				
Ž V		SAMPLE MEASUREMENT							_		1/30	G	RAB
F. XA	Chrysene	PERMIT REQUIREMENT				0.0	20	27	i og/L				
	Dibenzo(ah)anthracene	SAMPLE MEASUREMENT							ng/I		1/30	GI	RAB
	Divento(an)antui accuc	PERMIT REQUIREMENT				0.0	7	9	ug/L		L		
	Benzene	SAMPLE MEASUREMENT							таП		1/30	GI	RAB
	Delizene	PERMIT REQUIREMENT				0.0	N/A	250	ug/L				
	NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER ICERTIFY UNDERSTY	MDER PENALTY OF LAW THAT DIRECTION OR SUPERVISION FED PERSONNEL PROPERLY MY MOURT OF THE FERSO DIPECTLY RESPONSIBLE EX	THE DOC: MENT AND ALL AT	TACHLENTS WERE	PREPAGED TO ASSURE			TELEPHO	VΕ		DATE	
PERS	Leslie Hyde	SUBVITTED IAM REAR INCLUDING	I 19, TO THE BEST OF MY KNO E THAT THERE ARE SIGNER. THE POSSIBILITY OF FINE A	INLEDGE AND BELLEF, TRUE ANT PENALTIES FOR SUGM	ACCURATE, AND I	COMPLETE ORIGINAL ORIGINAL	TURE OF PRINCIPAL	no	(03) 286-36 	81	08	5	02
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8	Dibenzo(ah)anthracene, PAHs'-to	nat, Denzeue, B		CC: M. Pronol	d. City of l	Portland: T. Sell	. KI: S. Flyon, J	ка			2		4
ш	:DA Enm 2220 1 (10 DR)		/DEI	DI ACEG EDA EODI	עו די אט ואשרוני	THE SAN MATERIA	וחשו			c	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	VE	

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2008 01:03PM

FROM : KOPPERS

EPA Form 3320-1 (10-98)

Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

PERMITTEE NAME/ADDRESS (IN NAME	olide Facility Name/Locati	on If Different)	NATIONAL PO DISCH	HARGE MON (2-15)	HARGE ELIMINATION SYS INTORING REPORT	TEN (NFDES) (DMR) 17-19)		(	DIME NO	proved. 5. 2040-000 L'expires 0	)4 5-31-98
ADDRESS Koppers Inc. 7540 Nw Saint Heler		erim Permit Limi MAO June 8, 20	its OR-	-0000 <u>77-9</u> IIT NUMBER		001 ARGE NUMBER		·	фриста	_ 0xpoo	• • • • • • • • • • • • • • • • • • • •
Portland, Or. 97210- FACILITY Northwest Terminal Multnomah County		November 30, 20 430 / 101642	YEAR FROM 08		1 то 08	NO DAI	Check here if No		e compl	eting this fi	oma
PARAMETER (32-37)		(3 Card Only) QU. (46-53)	ANTITY OR LOADIN (54-61)			ALITY OR CONCE (45-53)	NTRATION (54-61)	<del></del>	ĒΧ	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	CAMPLE	AVERAGE	MAXIMUM	UNITS	MUMINIM	AVERAGE	MUMIXAM	UNITS	(82-83)	(64-68)	(69-70)
BTEX	SAMPLE MEASUREMENT			]				ug/L		1/30	GRAI
DIA.	PERMIT REQUIREMENT			-	6.0	N/A	1,000	l "gL			
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IUKBIDITI	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT									1/30	GRAI
Silver	PERMIT REQUIREMENT				0.0			mg/L			
Pentavalent Arsenic	SAMPLE MEASUREMENT							mg/L		1/30	GRAI
remayasent Arsent	PERMIT REQUIREMENT				0.0						
	SAMPLE MEASUREMENT									1/30	GRAI
Cadmium	PERMIT REQUIREMENT				0.0			mg/L			
C	SAMPLE MEASUREMENT									1/30	GRAI
Copper	PERMIT REQUIREMENT				0.0			mg/L			
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Mercury	PERMIT REQUIREMENT				0.0			mg/L			
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CC: M. Pronold, City of Portland: T. Self, KI; S. Flynn, KI (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

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NAME	E NAME/ADDRESS (Inc.) Koppers Inc. 7540 Nw Saint Helens	Inte	erim Permit Limit MAO June 8, 20	DISCH ts OR	ALLUTANT DISCH FARGE MONI (2-16) -000077-9 HT NUMBER	ARGE ELIM TORING	REPORT	TEM (NPDES; (DMR) 17-16) 001 43GE NJAMBER			For OM App	m App 18 No. proval	oroved. 2040-00 expires 0	04  5-31-98	
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EPA Form 33	320-1 (10-96)		(RE	PLACES EPA FOR	M T-40 WHIC	H MAY I	NOT BE U	SED.)				P	AGE	OF	

MONTHLY FLOW DATA

Gallons per pumping(all 6					<u>N</u>	MONTH	LY FLO	W DA	<u>TA</u>					Nie	mbero	of dave		Ave	age "s	lua"	
tanks)		# of p	oump.		# of D	ays/En	ner. Pur	<u>np.</u>	Emer.	Gals.		<u>Total</u>	Gals.			nonth of			arge pe		
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1 11011019	F	ı	I	ı	i t		1		l i	l i			I I	0.0	0.5	0.7	0.56	1	#####		m

# **QUARTERLY PAH SAMPLING**

Date sample taken:

Test Results:

ug/L ug/L

Date sample taken:

Test Results:

(Must be less than) 400 ugi

9

Month & Year:

Apr-08



Koppers Inc. Carbon Materials and Chemicals 7540 NW Saint Helens Road Portland, OR 97210-3663 Tel 503 286 3681 Fax 503 285 2831 www.koppers.com

April 3, 2008

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of March 2008.

There were no discharges into Doane Creek during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: turnerti@koppers.com

Sincerely,

T.J. Turnér

Plant Superintendent

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KJ

FROM : KOPPERS

22	Month & Year:		Ma	ar-08	!	MONT	HLY I	<u>VPDES</u>	S - DN	/IR - W	ORK	SHEE	Ξ									
	Gallons per pumping(all 6 tanks)		# of p	iumin.				LY FLO			. Gais.		<u>Total</u>	Gale			of days month of			rage "sl arge pe		•
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ξ	Cyanide									1	1	l			O	n/a	8.5			#####		ugl
Œ	Phenois									+	1	<del>                                     </del>	<del> </del>		0.0	0.5	0.7	0.56		#####		mg/L

## QUARTERLY PAH SAMPLING

Date sample taken:

Date sample taken:

Test Results: Test Results:

ug/L ug/L

(Must be less than) 400 ugl

	PERMITTEE NAME/ADDRESS (Inclu NAME	de Facility Name/Locati	on il Olfferenti	NATIONAL PL DISCI	ILLUIANI USCI HARGE MON (246)	HAKGE EUMING TUN SYS HTORING REPORT	яны (керы) (DMR) 17-49)			IMB No	proved. 5. 2040-00 11 expires	)04 05-31-	.GR
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09:54AM	LOCATION Multnomah County	47	430 / 101642	FROM 08 (20-21)	3 0 (22-23) (24-		3 31 8-29) (30-31)	NOTE: Read Instru	ctions before	compt	eting this	form	
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2008	(32-37)		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(52-63)	ANALYSIS (64-58)	3 <u> </u>	9-70)
03 20	FLOW	SAMPLE MEASUREMENT			CND	·	·			0	N/A	C.	ALC
Apr.	SEE COVER LETTER	PERMIT REQUIREMENT			GPD		·				<u> </u>		
Œ	TEMPERATURE	SAMPLE MEASUREMENT							°C		1/7	G	RAB
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		PERMIT REQUIREMENT				0.0	10	15					
Š Š	PITTE S	SAMPLE MEASUREMENT				·					1/30	G	RAB
Ä	PHENOLS	PERMIT REQUIREMENT				0.0	0.5	0.7	mg/L				
	CYANIDE	SAMPLE MEASUREMENT					·		ug/L		1/30	G	RAB
	CIANDE	PERMIT REQUIREMENT			<u> </u>	0.0	N/A	8.5	ug/L	<u></u>			
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	HYDROCARBONS	PERMIT REQUIREMENT				0.0	N/A	400	d ug/L			T	
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8 8	NAME/TITLE PRINCIPAL EXECUTIVE  Leslie Hyde	INCLUDE	43 THE POSSIBILITY OF EACH	AND DIPERSONVEY, FOR K	NOWING YOU ATTO	INF SEE IR	ATURE OF PRINCIPA		503) <b>286-3</b> 6	i <b>8</b> 1	08	4	03
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δ Σ	Dibenzo(ah)anthracene, PAHs'-t	otal, Benzene, I	STEX and Cyanic		la care	Boutland-T C	r 171. e 121	דע					4
Ę,	ED# Entry 3530 4 (10 06)		/6:	EDI ACES EDA EOD	MAT AN LANGE	Portland: T. Sel	ICED I	<u> </u>		ε	PAGE	Λ.	<del>. 4</del>

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Portland, Or. 97210		November 30, 200		MONI	TORING PERIOD	<del> </del>						
FACILITY Northwest Terminal		,	YEAR	MO DA		MO DAY	Check here if N	lo Discharge				
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Power(a) and have	SAMPLE MEASUREMENT									1/30	G	RAB
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	PERMIT REQUIREMENT				0.0	26	39					
Benzo(b)fluoranthene	SAMPLE MEASUREMENT			<u> </u>				ug/L		1/30	G	RAB
	PERMIT REQUIREMENT		···		0.0	15	27	ug iz		<u> </u>		
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	PERMIT REQUIREMENT		·		0.0	16	26					
Chrysene	SAMPLE MEASUREMENT							ug/L		1/30	G	RAB
	PERMIT REQUIREMENT				0.0	20	27	- Jogn				
Dibenzo(ab)anthracene	SAMPLE MEASUREMENT	·						ug/L		1/30	G	RAB
	PERMIT REQUIREMENT		·	į	0.0	7	9					
Benzene	SAMPLE MEASUREMENT		·					ug/L		1/30	G	RAB
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Leslie Hyde	UD TART D CESAB CESACTI TIMELS WAN AND	CALLER PECALTY OF LAW NAT TO DIRECTION OR SUPERVISION A MED PERSONNEL PROPERLY A MY INCULAR OF THE PERSON SUPERCITY RESPONSELS PE BO IS, TO THE BEST OF MY MAD RET THAT THERE ARE STORIES GO THE FOSS BLITT OF FIRE A COLLAND SU SU.S. § 1315. [PRE- CO	Y GATHER AND EVALUATE T W OR PERSONS WHO MAN CA GATHERING STE NYFO WILDSE AND BELET, TRUE CART PEUL TES FOR SUB- LIVE HIPPINSONNELS FOR SUB- LIVE HIPPINSONNELS FOR SUB-	HEINFORMATON MAGE THE SYSTEM REALTON, THE IN E ADOURATE AND HITTING FALSE IN KOMMY MODERN	S.B. AITTED , DR T-DES FOR HATION DOMFLETE DOMGTON DESCRIPTION	1991	and a	(503) <b>28</b> 6-36	i81	08	4	03
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FROM : KOPPERS

PERMITTEE NAME/ADDRESS (Include Faction Named program of Difference) NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (MPDES)
DISCHARGE MONITORING REPORT (DMR) Form Approved. DMB No. 2040-0004 NAME Approval expires 05-31-98 ADDRESS Koppers Inc. Interim Permit Limits 001 OR-000077-9 DISCHARGE NUMBER 7540 Nw Saint Helens Road PERMIT NUMBER Per MAO June 8, 2007 Portland, Or. 97210-3663 to November 30, 2008 MONITORING PERIOD Check here if No Discharge YEAR MO DAY FACILITY YEAR I MO | DAY Northwest Terminal LOCATION 3 NOTE: Read Instructions before completing this form FROM 08 3 61 m 08 31 Multnomah County 47430 / 101642 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) QUANTITY OR LOADING QUALITY OR CONCENTRATION (3 Card Only) (46-53) (4 Card Only) (38-45) REQUENC NO. SAMPLE PARAMETER (54-E1) ĎĒ ₹54-611 (46-53) TYPS (32-37) ANALYSIS AVERAGE UNITS (E2-63) MAYBUIM HMITS MINDAUM **AVERAGE** MAXIMIM (64-68) (69-70) SAMPLE 1/30 GRAB MEASUREMENT BTEX og/L PERMIT 0.0 N/A 1.000 REQUIREMENT SAMPLE GRAB 1/30 MEASUREMENT NTU TIRBIDITY PERMIT REQUIREMENT SAMPLE GRAB 1/30 MEASUREMENT Silver mg/L PERMIT 0.0REQUIREMENT SAMPLE MEASUREMENT 1/30 GRAB mg/L Pentavalent Arsenic PERMIT 0.0 REQUIREMENT SAMPLE GRAB 1/30 MEASUREMENT Cadmium mg/L PERMIT 0.0 REQUIREMENT SAMPLE GRAB 1/30 MEASUREMENT mg/L Copper PERMIT REQUIREMENT 0.0 SAMPLE 1/30 GRAB MEASUREMENT Mercury mg/L PERMIT 0.0 REQUIREMENT NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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Per MAO of June 8, 2007. The interim limits are referenced for the following: Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide. CC: M. Pronold, City of Portland: T. Self, Kl: S. Flynn, KI EPA Form 3320-1 (10-96) (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

8

Apr. 03 2008 09:55AM

PERMITTEE NAME/ADDRESS (NAME ADDRESS Koppers Inc. 7540 Nw Saint Hele	Inte	on # Different) Frim Permit Limi MAO June 8, 26	ts OR-	KLUTANT DISCI IARGE MON (2-18) -000077-9 IT NUMBER	IITORING REP	ON SYSTEM (NPDES) PORT (DMR) (17-13) 001 DISCHARGE NUMBER			0	MB No	sproved. 1, 2040-0 1 expires		·98
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Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Fielens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

March 3, 2008

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of February 2008.

There were no discharges during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: turnerti@koppers.com

Sincerely,

T.J. Turner

Plant Superintendent

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI S. Flynn, KI

PERMITTEE NAME/ADDRESS (In NAME	clude Facility Named	Alecation if Oilfarent)			HARGE ELIMINATION SY ITORING REPORT			0	MB No	proved. 5. 2040-00 If expires	004 05-31-	.C.R
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102 01)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(52-83)	(64-68)	3 I	9-70)
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a) anthracene, Benzo(a) pyrene, Benzo(b) fluoranthene, Benzo(k) fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

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,52 5.7			AVERAGE	MAXIMUM	UNITS	MINAMUM	AVERAGE	MAXIMUM	UN	NITS	(62-63)	(64-86)		1-7C)
Parts (a) and brown	SAMPLE MEASUREM	ENT								7		1/30	G	RAB
Benzo(a)anthracene	PERMIT REQUIREM	ENT	·			0.0	22	13	] '	ig/L				
Benzo(a)pyrene	SAMPLE MEASUREM								] .	1g/L		1/30	G	RAB
Deazo(u)py1ene	PERMIT REQUIREM					0.0	26	39						
Benzo(b)fluoranthene	SAMPLE MEASUREM	ENT				·			╛,	ıg/L		1/30	G	RAB
Denzo(o)thus anthene	PERVIT REQUIREM	ENT				0.0	15	27	Ţ,	g/D		 		
Benzo(k)fluoranthene	SAMPLE MEASUREM	ENT							╛.	ıg/L		1/30	G	RAB
	PERMIT REQUIREME					0.0	16	- 26						
Chrysene	SAMPLE MEASUREM	ENT							┨.	ıg/L		1/30	G	RAB
	PERMIT REQUIREME	≣NT				9.0	20	27					_	
Dibenzo(ah)anthracene	SAMPLE MEASUREMI	ENT			]		<u> </u>		╛,	ıg/L		1/30	G	RAB
2130220(43)41240010	PERMIT REQUIREME	NT				0.0	7	9		,g,11				
Benzene	SAMPLE MEASUREM									ıg/L		1/30	G	RAB
Tellectie	PERMIT REQUIREME	NT	·		] ,	0.0	N/A	250	]	'St n				
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER to		UNCER PENALTY OF LAW THAT CORRECTION OR SUPERVISION	TT-IS DOCUVENTAND ALLA N NACCORDANCE VITHAS	TTACHVENTS WER	E FREPARED .			15	LEPHON	ŧΕ		DATE	
Leslie Hyde	TH   34   36   SL   U	AT CUAL SEC ON RSCNS PAYTE ULAYA CUUDINA	UNDER PEVALTY OF LAW THAT ( KREDT TOW OR SUPPRANSIC LIFED PERSCHALL, PROCEER LIFED PERSCHALL, PROCEER LIFED PERSCHALL PROCEER DISABOTLY PESSONSIELE FOR DISABOTLY PESSONSIELE FOR DISABOTLE PESSONSIELE POR FINE BY THE POSSIELEY OF FINE	LY SATHER AND ENVIRAGE TO OR PERSONS WHO MAN OR PERSONS WHO MAN OR SATHERING THE WOOD SELENT TRUE CAN'T FENALT ES FOR SUB-AND SUPPRISONMENT ESS AND SUPPRI	THE INFORMATION LAGE THE SYSTEM REACTION, THE IN IE ADDURATE AND MITTING FALSE IN COMMING WITH A FOR	SUBSTITUTED A CH THOSE FORMATION DOUPLETE FORMATICAL DASS. SEE 14	Mu		<del>5</del> 03) :	286-36	81	08	3	03
TYPED OR PRINTED	Ü.	S.C. § 10	THE POSSIBLITY OF FINE) Per 3 DESC § 1919. Per The Secreted former purique of	relits urder free skings m :rdu and a years.)	ey include fires up t	SID GIVE and OF	ATURE OF PRINCIPA FICER OR AUTHORI	ZEDAGENT	REA	NUME	3ER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 3, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

Koppers002863

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

Ď	TYPED OR PRINTED	or cardinum improgramment of between 5 months and 5 years.)	OFFICER OR AUTHORIZED AGENT	CCCE NUMBER	YEAR	W
ers(	COMMENTS AND EXPLANATION OF ANY VIOLA Per MAO of June 8, 2007. The interim lim	ATIONS (Reference all attachments here) Lits are referenced for the following; Benzo(a)anthracene, I	Benzo(a)pyrene, Benzo(b)fluoranthen	e, Benzo(k)Auorant	hene, Ch	m
) ()	Dibenzo(ah)anthracene, PAHs'-total, Benzo	zene, BTEX and Cyanide.			·	•
3		CC: M. Pronold, City of Portland	d: T. Self, KI: S. Flynn, KI		3	
<u>ŏ</u>	EPA Form 3320-1 (10-96)	(REPLACES EPA FORM T-40 WHICH MAY N	NOT BE USED.}	F	AGE	_
	·	•				

OCATION Multnomah County	474	30 / 101642	FROM <u>88</u> (20-21)	2 0 (22-23) (24-		2 29 (30-31)	NOTE: Read Insti	ructions before	compl	eting this fo	amo
PARAMETER		(3 Cerd Only) QUI (46-53)	ANTITY OR LOADIN (54-61)	IG	(4 Card Only) QU (38-45)	ALITY OR CONCE (46-53)	NTRATION (54-61)		NO. EX	FREOLENCY OF	SAMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	TYP5 (69-70)
	SAMPLE MEASUREMENT									1/30	GRAB
BTEX	FERMIT REQUIREMENT				0.0	N/A	1,000	ug/L			
	SAMPLE MEASUREMENT									1/30	GRAB
TURBIDITY	PERMIT REQUIREMENT							עדא			
	SAMPLE MEASUREMENT									1/30	GRAB
Silver	PERMIT REQUIREMENT				0.0			mg/L			
Pentavalent Arsenic	SAMPLE MEASUREMENT	_						m a f		1/30	GRAB
Pentavalent Arseque	PERMIT REQUIREMENT				9.0			mg/L			
	SAMPLE MEASUREMENT									1/30	GRAB
Cadmiam	PERMIT REQUIREMENT				0.0			ng/L			
Carran	SAMPLE MEASUREMENT									1/30	GRAB
Copper	PERMIT REQUIREMENT				0-0			→ mg/L			
15	SAMPLE MEASUREMENT							a		1/30	GRAB
Mercury	PERMIT REQUIREMENT				0.0			mg/L			
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER ICENT	UNCER FEMILTY OF LANTH	AT THES DOCUMENT AND ALL AS ON IN ACCORDANCE WITH A S	TACHLENTS WER	E FREPARED TO ASSURE			TELEPHON	E	D.A	TE
NAME/TITLE PRINCIPAL EXECUTIVE  Leslie Hyde  TYPEO OR PRINTED	THAT GU BASED C PERSON SUBMIT TAMAN NOLOUI	ALIF ED PERSONNEL PROPET IN UY INCULRY OF THE PERS S BIRECTLY RESPONSIBLE ED IS, TO THE BEST OF MY XX NAME THAY THERE ARE SIGNAP NO THE POSSIBILITY OF PINE VIG. THE POSSIBILITY OF PINE	RLY GATHER AND EVALUATE T ON CR PERSONS WHO WAN FOCS GATHERING THE INFO HOW EGGE AND SELECT TRUE HOANT PENALTIES FOR SLEI AND IMPRISONVENT FOR M	HE INFORMATION AGE THE SYSTEM REAT, ON, THE IM E ACCURATE AND INTTING SOLES ING NOTING SOLE	SUBJUTTED. L OR THOSE FORMATION OCCUPLETE FORMATION USS. SEE 18 SIGNA	TURE OF PRINCIPAL	EXECUTIVE	593) 286-368	31	08	3 03
TYPED OR PRINTED				Aurora was ch n	OFF	ICER OR AUTHORIZE	D AGENT A	CE NUMBI	ER	YEAR M	D DAY

NATIONAL POLLUTANT DISCHARGE SLIMMATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16). (17-19)

MONITORING PERICD

TO

08

Of

001

DISCHARGE NUMBER

YEAR MO DAY

Check here if No Dischame

OR-000077-9

PERMIT NUMBER

YEAR MO DAY

FROM

PERMITTEE NAME/ADDRESS (Induce Facility Name/Location 7 Different) NAME

7540 Nw Saint Helens Road

Portland, Or. 97210-3663

Northwest Terminal

Interim Permit Limits

Per MAO June 8, 2007 to November 30, 2008

ADDRESS Koppers Inc.

FACILITY LOCATION

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

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RE	PERMIT QUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OF	FICER ICERTA	CUNCER PEVALTY OF LAW THA BY DIRECTION OR SUPERVISIO	THIS ECCLMENTANDALLA	TACHUSITSWER	EPREPARED TO ASSURE	مر . م		TE	ELEPHONE		DATE	
Leslie Hyde	TRAT III BASED C PERSON SLEWITI I PMARI SO UNI	HALFED PERSONVEL PROPER THE MY INQUIRY OF THE PERS IS DIRECTLY RESPONSIBLE I TED 18, TO THE BEST OF MY XI ARE THAT INFREARE SIGNIF WIN THE BUSSIBLITY OF EMP	RLY BATH-2R AND BLALLATE I NON OR PERSONS WHO SAA FOA BATHESING THE INFO NOWLEDGE AND BELZE TRU FOANT PENALTIES FOR SUB- 1417 UPPENAMENT FOR X	FEINFORMATION AGE THE SYSTEM RYATION, THE INI E ADQUEATE AND UITTING FALSE INI NOWING VOLUTION	S. EMITTED. I. OR THOSES FORMATION I COMPLETE FORMATION INS. SEE 18	NATURE OF PRINCIPA	EVECUTIVE	(503)	286-3681	08	3	03
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COMMENTS AND EXPLANATION OF ANY Per MAO of June 8, 2007. The inter Dibenzo(ah)anthracene, PAHs'-total	violations im limits ard I, Benzene, l	(Reference all attace e referenced for t BTEX and Cyani	hments hets) he following; Ber de.	rzo(a)anth	racene, Benzo(	a)pyrene, Benzo(d	)fluoranthen	e, Benz	zo(k)fluoran	ithene, C	hryse	ae,
			CC: M. Prono			elf. KI: S. Flynn.	KI			4		_4
EPA Form 3320-1 (10-96)		(R	EPLACES EPA FOR	UM T-40 WHI	CH MAY NOT BE	USED.)				PAGE	OF	
					•	•						

ACILITY Northwest Terminal Multnomah County		430 / 101642	YEAR   YEAR   108 (20-21)	MO DA 2 0 (22-23) /24-	TO 08 (26-27) (2	2 29 28-29) (30-31)	Check here if No NOTE: Read Instr	_	e compl	eting this f	חנחם
PARAMETER (32-37)		(3 Card Cnly) QU/ (46-53) AVERAGE	(NTITY OR LOAD) (54-61) MAXIMUM	UNITS	(4 Card Only) QU (38-45) MINIMUM	JALITY OR CONCE (46-53) AVERAGE	(54-61)	LIMITO	NO. EX (52-83)	FRECUENCY OF ANALYSIS	TYPE
·		AVERAGE	MONIXAM	UNITS	INTERIOR OF	AVERAGE	MAXIMUM	UNITS	[02-00]	(64-68)	(69-7
T 3	SAMPLE MEASUREMENT							mg/L		1/30	GR
Lead	PERMIT REQUIREMENT				0.0			mg c			
	SAMPLE MEASUREMENT							na/l		1/30	GR
Tin	PERMIT REQUIREMENT			]	0.0			ng/L			
	SAMPLE MEASUREMENT									1/30	GR
Seleuium	PERMIT REQUIREMENT				0.0			mg/L			
7ine	SAMPLE MEASUREMENT							mg/L		1/30	GR
Zinc	PERMIT REQUIREMENT				0.0			] mgr			
	SAMPLE MEASUREMENT	r									
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	SAMPLE MEASUREMEN	,									
	PERMIT REQUIREMENT	-		1				1			
NAME/TITLE PRINCIPAL EXECUTIV	E OFFICER ICER	THY INCERPENALTY OF LAWYE	ATTHS ECCLMENTANDALL	AT ACHUSUTSWEE	C PREPARED			TELEPHO	NE	Ē	ATE
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TYPED OR PRINTED	U.S.C. or 780	g 1001 AND 33 U.S.C. § 1319. () January Ingriscoment of Setween 5	Pensifes under these statuted a months and 5 years.)	new includes free t.p.	OF	FICER OR AUTHORIZ	ED AGENT	AREA NUM	BÉR	YEAR	MO

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (AFDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

MONITORING PERIOD

001 DISCHARGE NUMBER

Check here if No Discharge

OR-008077-9

PERMIT NUMBER

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Crifferent)

7540 Nw Saint Heleus Road

Portland, Or. 97210-3663

Interim Permit Limits

Per MAO June 8, 2007 to November 30, 2008

NAME

Koppers002865

ADDRESS Koppers Inc.

### MONTHLY NPDES - DMR - WORK SHEET

Month & Year:

tanks)

Feb-08

MONTHLY FLOW DATA

Total Gals. Emer. Gals.

Number of days during the month of

Average "slug" discharge per day

220,000

Gallons per pumping(all 6

Ω

# of pump.

0

# of Days/Emer. Pump.

0

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#DIV/0!

Days of the month:

					<u>S/</u>	MPLE	TEST	RESUL	<u>TS</u>				• 1				1 00% as l	1 .	I COTT I A	, 1	
	1	1 2	3	4	5	6	7	l a	9	10	11	12	# Of Samples	min.	LIMITS avg.	max.	80% of Max.	min.	ACTUA avg.	max.	un
Temperature	<del>                                     </del>	<del></del>	<u> </u>	<del>                                     </del>		-		<del>  -</del>	<u> </u>				Gentp.as	n/a	n/a	n/a	n/a		#####		C
PH	<del>                                     </del>		1	<del>                                     </del>	<u> </u>		<u> </u>	<del> </del>	<del></del>	<u> </u>		<b></b>		6.0		9.0	n/a		######		S
Oil & Grease		<u> </u>	<u> </u>	<del>                                     </del>	<del>                                     </del>			1						0	10	15	12		#####		mg
Turbidity																			#####		TN
Benzo(a)anthracene	<del> </del>	<del> </del>	├	<del> </del>		<b> </b>		<del> </del>							13	22			#####		ug
Benzo(a)pyrene		<del>                                     </del>	1	<del>                                     </del>	<del> </del>		<del></del>	<del> </del>					1		26	39			#####		uş
Benzo(b)fluoranthene			† —					<del> </del>							15	27			******		uį
Benzo(k)fluoranthene	1		1												16	26			#####		u:
Chrysene								1	1						20	27			#####		u
Dibenzo(ah)anthracene		1	1							1					7	9			#####		u
Benzene															n/a	250			#####		u
BTEX				1									1		n/a	1000			#####		u u
Cyanide							T	1						0	n/a	8.5			#####		l u
Phenois		Γ –		1		<u> </u>								0.0	0.5	0.7	0.56		#####		mg

## QUARTERLY PAH SAMPLING

Date sample taken:

Test Results: Test Results: ug/L ug/L

Date sample taken:

(Must be less than) 400 ugl

FROM : KOPPERS



February 5, 2008

Oregon Department of Environmental Quality Northwest Region 2020 SW Fourth Ave. Suite 400 Portland, OR 97201-4987 Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

Attention:

Elliot J. Zais

Sr. Environmental Engineer

Reference:

NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of January 2008 results. Also, attached please find the 1<sup>st</sup> quarter PAH and monthly BETX test results.

For the month, we had one discharge of 660,000 gallons. This discharge of 660,000 gallons was pumped on January  $10^{\rm th}$ 

There was 1 excursion during the month. Please refer to the letter of 1/13/08 for the explanation to the 1 excursion.

If you have any questions, I can be reached at 503-286-3681 or via e-mail at: <a href="mailto:turnerti@koppers.com">turnerti@koppers.com</a>

Sincerely,

T.J. Turner

Plant Superintendent

Cc:

M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

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FROM : KOPPERS

Month & Year:	Jan-08			<u> </u>	•	
Gallons per pumping(all 6		MONTHLY FLOW DA	ATA		Number of days	Average "slug"
tanks)	# of pump.	# of Days/Emer. Pump.	Emer. Gals.	Total Gals.	during the month of	discharge per day
660,000	1	0	0	660,000		#DIV/0!
Days of the month:						

					<u>s/</u>	AMPLE	TEST	RESUL	<u>.TS</u>				# of	ī	LIMITS		<b>I</b> 80% of ∈	1	A CTY LA	r	
	<u></u>	2	3	4	5	6	7	8	9	10	11	12	# Oi Samples	min.	avg.	max.	Max.	min.	ACTUA avg.	max.	unit
Temperature	7.7	7.5	7.6							1			3	n/a	n/a	n/a	n/a	7.5	7.6	7.7	C
PH	7.8	7.8	7.7	1						<del> </del>			3	6.0		9.0	n/a	7.7	7.8	7.8	รบ
Oil & Grease	7.1				1	t		1					1	0	10	15	12	ND	7.1	7.1	mg/L
Turbidity	20												1						20	20	NTU
Benzo(a)anthracene	3.9	2.0								-			2		13	22		2.0	2.95	3.9	
Benzo(a)pyrene	7.7	3.4		<del></del> -	<del>                                     </del>	<del>                                     </del>	<del></del>	<del>                                     </del>	┼~	<del>                                     </del>			2		26	39	ì	3.4	5.55	7.7	ugi ugi
Benzo(b)fluoranthene	6.7	3.2					<b></b>	1		<del>                                     </del>			2		15	27		3.2	4.95	6.7	ug!
Benzo(k)fluoranthene	4.9	2.5			1				1	1			2		16	26		2.5	3.70	4.9	ugi
Chrysene	4.1	2.4			T					1			2		20	27		2.4	3.25	4.1	ugi
Dibenzo(ah)anthracene	6.0	8.0			T	1				1			2		7	9		8.0	3.40	6.0	ugi
Benzene	830	540.0								1			2		n/a	250		540.0	685.0	B30	ugl
BTEX	2401	1272			1	T			1	1			2		n/a	1000		1272.0	1837	2401	ugi
Cyanide	3.60				Г								1	0	n/a	8.5		0	3.60	3.6	ugi
Phenois	0.063				1			1	1				1	0.0	0.5	0.7	0.56	0.00	0.063	0.063	

## QUARTERLY PAH SAMPLING

Date sample taken:
Date sample taken:

1/4/2008 1/8/2008 Test Results:

520.4

ug/L ug/L

Test Results:

395.8

(Must be less than ) 400 ugl

EPA Form 3320-1 (10-95)

PERMITTEE NAME/ADDRESS (Inc. NAME			DISCH	(ARGE MON (2-16)	HARGE ELIMINATION SY	(DMR) (17-19)			OMB N	pproved. o. 2040-00 al expires (	
ADDRESS Koppers Inc. 7540 Nw Saint Helen		erim Permit Limi r MAO June 8, 20		-00 <b>0077-9</b> IIT NUMBER	DISC	001 WARGE NUMBER			••	·	
Portland, Or. 97210-		November 30, 20	08		TORING PERIOD		☐Check here if No	Dischame	•		
FACILITY Northwest Terminal LOCATION Multnomah County		7430 / 101642	FROM 08 (20-21)	MO DA 1 0 (22-23) (24-	1 TO 08	MC DAI	NOTE: Read Instru	-	e comp	leting this i	form
PARAMETER		(3 Card Only) QU. (46-53)	ANTTY OR LOAD!			JALITY OR CONCE (46-53)	NTRATION (54-61)		NO.	FREQUENC	SAMPL
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	I AMAIVGIC	(69-70
FLOW	SAMPLE MEASUREMENT			O'DD.			·		0	N/A	CAL
SEE COVER LETTER	PERMIT REQUIREMENT			GPD							
TERROR DA TAURE	SAMPLE MEASUREMENT	,			7.5	7.6	· 7.7	°C		1/7	GRAI
TEMPERATURE	PERMIT REQUIREMENT				N/A	N/A	<25deg C.				
	SAMPLE MEASUREMENT				7.7	7.8	7.8	ar.		1/7	GRAI
PH	PERMIT REQUIREMENT				6.5	N/A	8.5	SU			
OIL & GREASE	SAMPLE MEASUREMENT				0	7.1	7.1	mg/L		1/7	GRAI
OIL & GREAGE	PERMIT REQUIREMENT				0.0	10	15				
DWCAIGH G	SAMPLE MEASUREMENT				0.0	0.063	0.063			1/30	GRAH
PHENOLS	PERMIT REQUIREMENT				0.0	0.5	0.7	mg/L			
CYANIDE	SAMPLE MEASUREMENT				0.0	3,60	3.60	ug/L		1/30	GRAB
CIAMBE	PERMIT REQUIREMENT				0.0	N/A	8.5	L LEGIL			
POLY AROMATIC	SAMPLE MEASUREMENT				395.8	458.1	520.4	ug/L		Qtr	GRAB
HYDROCARBONS	PERMIT REQUIREMENT				9.0	N/A	400	] "g/L			
NAME/TITLE PRINCIPAL EXECUTIVE	E OFFICER LOBRIT	YUNDER PENALTY OF LAW TH MY DIRECTICS OR SUPERVISI	ATTHIS DOCUMENT AND ALL A ON DIACCORDANCE WITH A	CTACHUENTSWER	E PREPARED TO ASSURE			TELEPHON	E	DAT	E
Leslie Hyde	EASED 4 PERSON SUBMITI AMAN INCLUSI	VUNDER PENNITY DE LAW THINY DIRECTICAS OR SUPERVISIA NULL PEOPERSONNEL PROPER ON MY INCUIRY OF THE SEDS. SO DIRECTIVE RESPONSIVE PROPER OF MY RESPONSIVE PROPERSON OF THE SEDS OF MY RESPONSIVE PROPERSON OF THE POSSIBLITY OF PART NUMBER THAT THERE ARE SUSC. § 215 PG. (PART NUMBER) AND SUSC. § 215 PG. (PART NUMBER	RLY GATHER AND EMILIATE SON OR PERSONS WAD MAY FOR GATHERING THE INFO NOWLEGGE AND BELIEF, TR. FICANT PRIVALTIES FOR SUB AND INFRISONMENT FOR I	I HE IN TORMATION NAGE THE SYSTEM ORMATION: THE IN HE ACCURATE, AND SMITTING FALSE IN KNOWING WOLATI	AUBAUTTED. FORMATION I COMPLETE FORMATION ONS. SEE 16	Jan 1		103) 286-36 	81	08 2	05
TYPED OR PRINTED						LATURE OF PRINCIPA FICER OR AUTHORI	ED AGENT A	SA NUMB		YEAR M	
COMMENTS AND EXPLANATION OF Per MAO of June 8, 2007. The i	ANY VIOLATIONS nterim limits an	i (Reference all attac e referenced for f	hments here) the following; Be	nzo(a)anth	racene, Benzo(a	)pyrene, Benzo(l	)fluorauthene, E	Benzo(k)flu	oranth	ene, Chry	sene.

MATIONAL POLITICANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Dibenzo(ah)authracene, PAHs'-total, Benzene, BTEX and Cyanide.

L.

PERMITTEE NAME/ADDRESS (I NAME ADDRESS Koppers Inc.		ion#Offerent) erim Permit Limi	DISCH	LUTANT DISCH IARGE MON (2-16) 000077-9	ARGE ELIMINATION SY ITORING REPORT	STEM (NPDES) (DMR) (17-19)			omb n	pproved. o. 2040- al expires	0004 5 05-31- <del>9</del> 8
7540 Nw Saint Hele Portland, Or. 97210 FACILITY LOCATION Multnomah County	ns Road Per 1-3663 to I	MAO June 8, 20 November 30, 20	07 PERM 08 YEAR FROM 08	T NUMBER	TORING PERIOD Y YEAR TO 08	MO DAY	□Check here if No NOTE: .Read instr		e comp	leting this	; form
PARAMETER (32-37)		(46-53)	ANTITY OR LOADIN (54-61)		<u> </u>	JALITY OR CONCE (46-53)	(54-61)		NO.	FREQUEN OF ANALYS	SAMP
	DATE	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68	
Benzo(a)anthracene	SAMPLE MEASUREMENT		L		2.0	2.95	3.9			1/30	GRA
Denzo(a)anturacent	PERMIT REQUIREMENT				0.0	22	13	ug/L			
Benzo(a)pyrene	SAMPLE MEASUREMENT				3.4	5.55	7.7	ug/L		1/30	GRA
DEII20(a)pyreae	PERMIT REQUIREMENT				0.0	26	39	Light.			
Power (h) Simon and	SAMPLE MEASUREMENT				3.2	4.95	6.7			1/30	GRAI
Benzo(b)fluoranthene	PERMIT REQUIREMENT				0.0	15	27	ng/L			
Benzo(k)fluoranthene	SAMPLE MEASUREMENT				2.5	3.70	4.9	ug/L		1/30	GRAI
DCD20(K)MIO) SITURGE	PERMIT REQUIREMENT				0.0	16	26				
Chaman	SAMPLE MEASUREMENT				2.4	3.25	4.1			1/30	GRAE
Chrysene	PERMIT REQUIREMENT				0.0	20	27	ug/L			
Dibenzo(ah)authraceae	SAMPLE MEASUREMENT				0.8	3.40	6.0			1/30	GRAB
Divenzo(wa),aucin accele	PERMIT: REQUIREMENT				0.0	7	9	ng/L			
Benzene	SAMPLE MEASUREMENT		¥-		540.0	685.0	830.0	ug/L		1/30	GRAB
- Louis III	PERMIT REQUIREMENT				0.0	N/A	250	T agr			
NAME/TITLE PRINCIPAL EXECUTIVE	E OFFICER LORRIEY	UNDER PENALTY OF LAW THAY Y DIRECTION OR SUPERVISE	TTHIS DOCLMENT AND ALL AT IN IN ACCORDANCE WITH A S	TACHWENTSWER YSTEM DESIGNE	FREPARED TO ASSURE	. /2		TELEPHO	VE.		ATE
Leslie Hyde	THAT QUA BASED OF PERSONS SUBLITTE I AM AYAN	UNDER PENALTY OF LAW THAM Y DIRECTION OR SUPERVISE MULTED FERSONNEL PROPER N MY BIOURY OF THE PERS SO DIRECTLY RESPONSIBLE DIS, 10 THE BEST OF MY KN HE THAT THERE ARE SIGNIF OF THE POSSIBILITY OF FINE COT HE POSSIBILITY OF FINE COT HAT DIS C. \$ 1318. (PR INTERCOLORS OF THE POSSIBILITY OF FINE COT HAT DIS C. \$ 1318. (PR INTERCOLORS OF THE POSSIBILITY OF FINE COT AND SU U.S.C. \$ 1318. (PR INTERCOLORS OF THE POSSIBILITY OF FINE COT AND SU U.S.C. \$ 1318. (PR INTERCOLORS OF THE POSSIBILITY OF FINE THE POSSIBILITY OF THE POSSIBILITY OF THE THE POSSIBILITY OF THE POSSIBILITY OF THE THE POSSIBILITY OF THE POSSIBILITY OF THE THE POSSIBILITY OF THE POSSIBILITY OF THE THE POSSIBILITY OF THE POSSIBIL	LY GATHER AND EVALUATE T ON OR PERSONS 19HD MAN POR GATHERING THE INFOR DIMLEGGE AND BELIEF, TRUI KAMIT PENALTIES FOR SUBI	HE INFORMATION AGE THE SYSTEM MATION, THE IN ACCURATE AND ATTING FALSE IN	SIJEMITTED. I, OR THOSE FORMATION COMPLETE FORMATION	Henr	-a2	(503) 286-36 	81	08	2 05
TYPED OR PRINTED	U.S.C. § 1	CO1 AND 33 U.S.C. § 1319. (Pr m impriso:mer 2 of between 6 m	read not a viver of the second	A garantine just rib #	Sin Ministration of Officers	ATURE OF PRINCIPA FICER OR AUTHORI	LEXECUTIVE ZED AGENT	AREA NUM	BER	YEAR	MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ab)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

EPA Form 3320-1 (10-96)

PERMITTEE NAME/ADDRESS (In NAME ADDRESS Koppers Inc.	Inte	rim Permit Lim	DISCH its OR-	LLUTANT DISCH LARGE MON (2-16) 000077-9 IT NUMBER	IARGE ELIMINATION 51	STEM (NPDES) (DMR) (17-19) 001 HARGE NUMBER		(	OMB N	pproved o. 2040- al expire	-0004	
7540 Nw Saint Heler Portland, Or. 97210- FACILITY LOCATION Multnomah County	-3663 to I	MAO June 8, 20 November 30, 20 30 / 101642	108 YEAR FROM 08	MONI	TORING PERIOD Y YEAR TO 08	MO DAY	□Check here if No NOTE: Read Instr		e compl	leting thi	is fom	'n
PARAMETER (32-37)		(3 Card Only) QU (46-53)	ANTITY OR LOADIN (54-61)			JALITY OR CONCE (46-53)	NTRATION (54-61)		NO. EX	FREQUE OF	NCY	SAMP
(02-01)		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(82-63)	ANALYS (64-68	31S 3)	(69-70
	SAMPLE MEASUREMENT				1272	1837	2401			1/30	,   ,	GR/
BTEX	PERMIT REQUIREMENT				0.0	N/A	1,000	ug/L				
TURBIDITY	SAMPLE MEASUREMENT						20	NTU		1/30	, ,	GRA
TORBIDILI	PERMIT REQUIREMENT							] ""				
	SAMPLE MEASUREMENT		,		ND		ND			1/30	1	GRA
Silver	PERMIT REQUIREMENT				0.0			mg/L				
Pentavalent Arsenic	SAMPLE MEASUREMENT				0		0.022	mg/L		1/30	7	GRA
1 cutavalent Afsenie	PERMIT REQUIREMENT				0.0							
	SAMPLE MEASUREMENT				ND		ND			1/30	(	GRA
Cadmium	PERMIT REQUIREMENT				0.0			mg/L			T	
Соррег	SAMPLE MEASUREMENT				0		0.007			1/30	e	FRAI
Соррег	PERMIT REQUIREMENT				0.0			mg/L			T	
Mercury	SAMPLE MEASUREMENT				0		0.00011	mg/L		1/30	G	RAE
weetcut y	PERMIT REQUIREMENT				0.0						1	
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER ICERTIFY	UNDER PENALTY OF LAN'TH	ATTHS DOCUMENTANDALLA ON IN ADVINGUE WITH A	TACHMENTS WES	EPREATED			TELEPHON	E		DATE	
Leslie Hyde	THAT QUA BASED ON PERSONS SUBVITTE LAMAWAY	LIFED PERSONNEL PROPE MY MOUIRY OF THE PERSONNEL E OFFECTLY RESPONSIBLE D IS TO THE BEST OF MY K RE THAT THERE ARE SIGNI	ATTHS DOCLMENT AND ALL AT ON IN ADCORDANCE WITH AS ELY GATHER AND EVALUATE I SON OR PERSONS WHO MAN FOR CATHERING DIE IMPO INVALENCE AND BELIET TRUI PCANT PENALTIES FOR SUB- AND INFRISONMENT FOR M	HE INFORMATION IAGE THE SYSTEM RUATION, THE IN E. ACCURATE, AND MITTING FALSE IN	SUBMITTED A OR THOSE FORMATION COMPLETE FORMATION	Mur		503) 286-36 1	81	08	2	05
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COMMENTS AND EXPLANATION OF Per MAO of June 8, 2007. The in						·				YEAR C	MO	DA

:KOPPERS	
FROM	

PERMITTEE NAMENAME ADDRESS Kopp 7540		Ent	son F Different; terim Permit Limits r MAO June 8, 200°	DI	AL POLLUTANT DISCH ISCHARGE MON (2-16) OR-000077-9 ERMIT NUMBER	ITORING	REPORT	STEM (NPDES) (DMR) (17-18) 001 ARGE NUMBER			C	DMB No	proved. 2040-0 expires	1004 105-31-98
Portia FACILITY North LOCATION	and, Or. 97210-3 west Terminal comah County	663 to	November 30, 2000 7430 / 101642	FROM (	MONI AR MO DA 18 1 0 -21) (22-23) (24-	1 70	YEAR 08	MO DAY 1 31 28-29) (30-31)	Check here if		•	comple	eting this	form
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		SAMPLE MEASUREMENT	+				0		ND		~		1/30	GRAI
Lea	ad	PERMIT REQUIREMENT				(	).0			,	ng/L			
Ti	,	SAMPLE MEASUREMENT							NÐ	_   .	ng/L		1/30	GRAB
		PERMIT REQUIREMENT				C	0.0						·	
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AUGUSTI E SPINO		PERMIT REQUIREMENT					<del></del> _		<u> </u>				_ ·	
NAME/TITLE PRINC	IPAL EXECUTIVE	THAT O	FY UNDER PENALTY OF LAW THAT I MY DIRECTION OR SUPERASSON UALIFIED PERSONNEL PROPERTY ON MY INDUITY OF THE PERSON	THIS DOCUMENTAN IN ACCORDANCE W (GACHER AND EWA) N OR PERSONS WH	DALLATTACHVENTS WEF ITMA SYSTEM DESIGNED LIATE THE INFORMATION IC MANAGE THE SYSTEM	E PREPARED D TO ASSURE I SUBVITTED M, OR THUSE	0	Afr			EPHONE 286-368	_		ATE
	slie Hyde	PERSO SUBWIT I AM AN WCULD U.S.C. §	NS DIRECTLY RESPONSIBLE FO THE BEST OF MY NOOI WARE THAT THERE ARE SIGNED. HING THE POSSIBILITY OF FIXE W 1 1001 AND 33 U.S.C. § 1319. (Pens num impalso Thank of between 5 mon	IR GATHERING THI WILEDGE AND BELIE ANT PENALTIES FO ND IMPRISONMENT Billes under those state	E INFORMATION, TREE EV F. TRUE, ACCURATE, AND IR SUBMITTING FALSE IV FOR KNOWING VIOLATIV LASS ONLY TOURS OF INTERNATION OF IN	SFORMATION D COMPLETE FORMATION, ONS. SEE 18 to \$10,000 and	8 GN	ATURE OF PRINCIP	AL EXECUTIVE				08	2 05
COMMENTS AND E		NY VIOLATION: terim limits ar	S (Reference all attachme referenced for the	ments here) e following;				pyrene, Benzo(		AREA DODE	NUMBE (k)fino			ysene,
Dibenzo(ah)anthr EPA Form 3320-1 (10	·	otal, Benzene,	BTEX and Cyanide	CC: M. P	ronoid, City of FORM T-40 WHI	Portian	id: T. Sel	If. KI: S. Flynn.	кі	<del></del>	<del></del>	PAG	4	OF 4

FAX NO. :5032852831

FROM : KOPPERS



# CERTIFICATE OF ANALYSIS

CLIENT: Koppers Industries, Inc.

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

PROJECT NAME: Monthly NPDE8

SUBMITTED: 01/04/08 10:45

REPORT NUMBER: 8010402 REPORT DATE: 02/05/08 09:40

PAGE: 1 OF 19

CISAMPLE	CLIENTS ID#		DA'	TE TIME	MATRIX			
8010402-01	Stormwater Tanka		01/	04/2008 1000	Water			
8010402-01	Stormwater Tenks				Water ·			
8010402-02	Stormwater Tanka		01/	08/2008 1200	Water			
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME	NOTES
8010402-01	SAMPLE ID: Storm	ıwater Tank <del>s</del>						
General Bench A	\nalysis							
CYANIDE, WEAK ACID	8M 4500-CN I.	CYANIDE, TOTAL	0.0036	mg/L	0,0030	KMC	01/08/2008 12:20	
O & G, NP (SGT-HEM)	EPA 1684	NONPOLAR OIL & GREASE	3.1	mg/L	2,0	60	01/07/2009 08:52	
O & G, TOTAL (HEM)		OIL/GREASE, TOTAL	7.1	mg/L	2,0	<b>\$</b> 0	01/04/2008 17:41	
PHENOLS, TOTAL	EPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.063	mg/L	0.050	DK	01/07/2008 18:47	,
TURBIDITY	EPA 180.1	TURBIDITY	20	NTU	0.10	KM¢	01/04/2008 18:30	
Total Mercury by	Cold Vapor Atomi	c Fluorescence						
MERCURY CV AF	EPA 245.7/1631E	MERCURY	0.00011	mg/L	0.000050	KMC	01/08/2008 20:47	
Total Metals by I	inductively Coupled	l Plasma					, , , , , , , , , , , , , , , , , , , ,	
ARSENIC - ICP	EPA 200.7/6010B	ARSENIC	0.022	mg/L	0,009		01/04/2008 18:10	
CADMIUM - ICP		CADMIUM	ND	mg/L	0,003	•	01/04/2008 18:10	
COPPER - ICP		COPPER	0.007	mg/L	0,004	• •	01/04/2008 18:10	
LEAD - ICP	Compression and administrative or a single	LEAD	ND	mg/L	0.004	•••	01/04/2008 18:10	
SELENIUM - ICP		BELENIUM	ND -	mg/L	0,090		01/04/2008 18:10	
SILVER - ICP		SILVER	ND	mg/L	0,009		01/04/2008 18:10	
TIN-ICP		TIN	ND	mg/L	0,036		01/04/2008 18:10	
ZINC - ICP		ZINC	0.067	mg/L	0.003		01/04/2008 18:10	
Volatile Organica	by Gas Chromato	graphy/Mass Spectroscopy						
BTEX 824	EPA 624	BENZENE	0.83	mg/L	0.0050	JRW	01/07/2008 13:05	
•	•	TOLUENE	1.3	mg/L	0.0050			,
		ETHYLBENZENE	0,030	mg/L	0.0050	- 4/	1 Tota	
		M- & P-XYLENE	0.17	mg/L	0,0050	~/ "	, , , , , , ,	•
		O-XYLENE	0.071	mg/L	0.0050	•		
		Surrogate: Dibromofluoromethane	56.5 %	%RECOVE	RY 50-150			
		Surrogate: Fluorobenzene	84.8 %	%RECOVE	RY 50-150			
		Surrogate: Chlorobenzene-d5	148 %	%RECOVE	RY 50-150			

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Authorized for Release By:

James Weinkauf - QA/QC Director

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Ph:(503) 286-9464 Fax:(503) 286-5355 E-mail:cilabqa@ColumbiaInspection.com



# CERTIFICATE OF ANALYSIS

REPORT DATE:	02/06/08 09:40	REPORT N	UMBER:8010/	102			PAGE: 2 O
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME NO
3010402-01	SAMPLE ID: Stormwa	ater Tanks					
Volatile Organics	by Ges Chromatogra	aphy/Mass Spectroscopy Surrogate: 1,4-Dichloroberizene-d4	76.7 %	%RECOVERY	50-150		
Semi-Volatile Org	janics by Gas Chrom	natography/Mass Spectroscopy				• •	**** ***** ****
PNAH B25	EPA 625 (SIM)	ACENAPHTHENE	11.5	ug/L	0.05	DM	01/08/2008 00:14
	, , , , , , , , , , , , , , , , , , ,	ACENAPHTHYLENE	13.7	ug/L	0.05		
		ANTHRACENE	2.0	ug/L	0.05		
		BENZO(a)ANTHRACENE	3.9	nB\r -0	0,05		
		BENZO(a)PYRENE	7.7	ug/L	8.05		
		BENZO(b)FLUORANTHENE	6.7	ug/L	0.05		
		BENZO(g,h,i)PERYLENE	5,4	ug/L	0.05		
		BENZO(k)FLUORANTHENE	4.9	ug/L	0.05		
		CHRYSENE	4.1	ug/L	0.05		
		DIBENZO(a,h)ANTHRACENE	6.0	ug/L	0.05		20.4 101
		FLUORANTHENE	8.3	ug/L ug/L	0.05	K	204 101
		FLUORENE	9.8	.ug/L	0.05	,	, ,
		INDENO(1,2,3-cd)PYRENE	6,3	ug/L	0.05		
		NAPHTHALENE	415	ug/L	0.05		
		PHENANTHRENE	8.3	ug/L	0.05		
		PYRENE	6.8	ugyL.	0.05		
		Surrogate: 2-Fluorobiphenyl	108 %	%RECOVERY			
		Surrogate: Nitrobenzene-D5	150 %	%RECOVERY			
		Surrogate: p-terphenyl-D14	128 %	%RECOVERY			
B010402-02	SAMPLE ID: Stormwa						
		aphy/Mass Spectroscopy					
BTEX 624	EPA 624	BENZENE	0.54	mg/L	0.0050	JRW	04/00/0000 44/50
- / L-/ OE /	LI A GET	TOLUENE	0.60	_	0.0050	DICAR	01/09/2008 14:52
		ETHYLBENZENE	0.014	mg/L			
		M- & P-XYLENE	0.082	mg/L	0,0050		
		O-XYLENE		mg/L	0.0050 0.0050	1,2	12 Total
					0.0000		
			0.036	mg/L			
,		Surrogate: Dibromofluoromethane	65.1 %	%RECOVERY	50-150	,	
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene	65.1 % 72.7 %	%RECOVERY %RECOVERY	50-150 50-150	,	
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogato: Chlorobenzene-d5	65.1 % 72.7 % 105 %	%RECOVERY %RECOVERY %RECOVERY	50-150 50-150 50-150	,	
Semi-Volatile Orr	unice by Gae Chrom	Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4	65.1 % 72.7 %	%RECOVERY %RECOVERY	50-150 50-150 50-150	, 	***************************************
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4 natography/Mass Spectroscopy	65.1 % 72.7 % 105 % 69.3 %	%RECOVERY %RECOVERY %RECOVERY %RECOVERY	50-150 50-150 50-150 50-150		•••••••••••••••••••••••••••••••••••••••
	ganica by Gas Chrom EPA 625 (SIM)	Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4 natography/Mass Spectroscopy ACENAPHTHENE	65.1 % 72.7 % 105 % 69.3 % 	%RECOVERY %RECOVERY %RECOVERY %RECOVERY	50-150 50-150 50-150 50-150		01/09/200B 14:48
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4 natography/Mass Spectroscopy ACENAPHTHENE ACENAPHTHYLENE	65.1 % 72.7 % 105 % 69.3 %	**RECOVERY **RECOVERY **RECOVERY **RECOVERY Ug/L Ug/L	50-150 50-150 50-150 50-150 0,03		•••••••••••••••••••••••••••••••••••••••
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4 natography/Mass Spectroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE	65.1 % 72.7 % 105 % 69.3 %	%RECOVERY %RECOVERY %RECOVERY %RECOVERY ug/L ug/L ug/L	50-150 50-150 50-150 50-150 0,03 0,03	 DM	01/09/200B 14:48
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4 natography/Mass Spectroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(e)ANTHRACENE	65.1 % 72.7 % 105 % 69.3 %	%RECOVERY %RECOVERY %RECOVERY %RECOVERY ug/L ug/L ug/L	50-150 50-150 50-150 50-150 0,03 0,03 0,03 0.03	 DM	01/09/200B 14:48
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4 natography/Mass Spectroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(e)ANTHRACENE BENZO(e)PYRENE	65.1 % 72.7 % 106 % 69.3 %	%RECOVERY %RECOVERY %RECOVERY %RECOVERY ug/L ug/L ug/L ug/L	50-150 50-150 50-150 50-150 0.03 0.03 0.03 0.03 0.03	 DM	01/09/200B 14:48
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Therebenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4  natography/Mass Spectroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(a)PYRENE BENZO(b)FLUORANTHENE	65.1 % 72.7 % 106 % 69.3 % 13.3 15.3 2.7 2.0 3.4 3.2	%RECOVERY %RECOVERY %RECOVERY %RECOVERY ug/L ug/L ug/L ug/L	50-150 50-150 50-150 50-150 0.03 0.03 0.03 0.03 0.03 0.03	 DM	•••••••••••••••••••••••••••••••••••••••
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: 1,4-Dichlorobenzene-d4  natography/Mass Spectroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(e)ANTHRACENE BENZO(e)PYRENE BENZO(e)FLUORANTHENE BENZO(g,h,i)PERYLENE	65.1 % 72.7 % 105 % 69.3 %	%RECOVERY %RECOVERY %RECOVERY %RECOVERY ug/L ug/L ug/L ug/L ug/L	50-150 50-150 50-150 50-150 0.03 0.03 0.03 0.03 0.03 0.03 0.03	 DM	01/09/200B 14:48
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4 natography/Mass Spactroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(a)PYRENE BENZO(b)FLUORANTHENE BENZO(g,h,l)PERYLENE BENZO(k)FLUORANTHENE	65.1 % 72.7 % 106 % 69.3 %	%RECOVERY %RECOVERY %RECOVERY %RECOVERY ug/L ug/L ug/L ug/L ug/L ug/L ug/L	50-150 50-150 50-150 50-150 0.03 0.03 0.03 0.03 0.03 0.03 0.03 0.	 DM	01/09/200B 14:48
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4  natography/Mass Spactroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(a)PYRENE BENZO(b)FLUORANTHENE BENZO(g,h,l)PERYLENE BENZO(k)FLUORANTHENE CHRYSENE	65.1 % 72.7 % 106 % 69.3 %	%RECOVERY %RECOVERY %RECOVERY %RECOVERY ug/L ug/L ug/L ug/L ug/L ug/L ug/L	50-150 50-150 50-150 50-150 0.03 0.03 0.03 0.03 0.03 0.03 0.03 0.	 DM	01/09/200B 14:48
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4 natography/Mass Spactroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(a)PYRENE BENZO(b)FLUORANTHENE BENZO(g,h,i)PERYLENE BENZO(k)FLUORANTHENE CHRYSENE DIBENZO(a,h)ANTHRACENE	65.1 % 72.7 % 106 % 69.3 %	%RECOVERY %RECOVERY %RECOVERY %RECOVERY ug/L ug/L ug/L ug/L ug/L ug/L ug/L ug/L	50-150 50-150 50-150 50-150 0.03 0.03 0.03 0.03 0.03 0.03 0.03 0.	 DM	01/09/200B 14:48
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1.4-Dichlorobenzene-d4 natography/Mass Spectroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(a)ANTHRACENE BENZO(b)FLUORANTHENE BENZO(b)FLUORANTHENE BENZO(b)FLUORANTHENE CHRYSENE DIBENZO(a,h)ANTHRACENE FLUORANTHENE	65.1 % 72.7 % 105 % 69.3 %  13.3 15.3 2.7 2.0 3.4 3.2 1.9 2.5 2.4 0.8 6.4	%RECOVERY %RECOVERY %RECOVERY %RECOVERY Ug/L ug/L ug/L ug/L ug/L ug/L ug/L ug/L u	50-150 50-150 50-150 50-150 0.03 0.03 0.03 0.03 0.03 0.03 0.03 0.	 DM	01/09/200B 14:48
		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1,4-Dichlorobenzene-d4 natography/Mass Spectroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(a)ANTHRACENE BENZO(b)FLUORANTHENE BENZO(b)FLUORANTHENE BENZO(b;FLUORANTHENE CHRYSENE DIBENZO(a,h)ANTHRACENE FLUORANTHENE FLUORANTHENE FLUORANTHENE FLUORENE	95.1 % 72.7 % 105 % 69.3 %  13.3 15.3 2.7 2.0 3.4 3.2 1.9 2.5 2.4 0.8 6.4 9.0	%RECOVERY %RECOVERY %RECOVERY %RECOVERY  wg/L ug/L ug/L ug/L ug/L ug/L ug/L ug/L u	50-150 50-150 50-150 50-150 0.03 0.03 0.03 0.03 0.03 0.03 0.03 0.	 DM	01/09/200B 14:48
Semi-Volatile Org		Surrogate: Dibromofluoromethane Surrogate: Fluorobenzene Surrogate: Chlorobenzene-d5 Surrogate: 1.4-Dichlorobenzene-d4 natography/Mass Spectroscopy ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(a)ANTHRACENE BENZO(b)FLUORANTHENE BENZO(b)FLUORANTHENE BENZO(b)FLUORANTHENE CHRYSENE DIBENZO(a,h)ANTHRACENE FLUORANTHENE	65.1 % 72.7 % 105 % 69.3 %  13.3 15.3 2.7 2.0 3.4 3.2 1.9 2.5 2.4 0.8 6.4	%RECOVERY %RECOVERY %RECOVERY %RECOVERY Ug/L ug/L ug/L ug/L ug/L ug/L ug/L ug/L u	50-150 50-150 50-150 50-150 0.03 0.03 0.03 0.03 0.03 0.03 0.03 0.	 DM	01/09/200B 14:48

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Authorized for Release By:James Weinkauf - QA/QC Director

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Ph:(503) 288-9464 Fax:(503) 286-5356 E-mail:cilabqa@ColumbiaInspection.com



# CERTIFICATE OF ANALYSIS

The dynamics	02/05/08 09:40	REPORT N	JMBER:80104	602			PAGE: 3 OF 19
REPORT DATE: SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION	TECH	DATE/TIME NOTES
	SAMPLE ID: Stormw ganics by Gas Chron EPA 626 (SIM)	ater Tanke natography/Mass Spectroscopy PHENANTHRENE PYRENE Surrogate: 2-Fluorobiphenyl Surrogate: Nitrobenzene-D5 Surrogate: p-terphenyl-D14	3.0 4.9 101 % 108 % 144 %	ug/L ug/L %RECOVERY %RECOVERY %RECOVERY	50-150	DM	01/09/200B 14:48

This report may not be reproduced except in full.

Authorized for Release By:James Weinkauf - QA/QC Director

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Ph:(503) 288-9484 Fax:(503) 286-5355 E-mail:cliabqa@ColumbiaInspection.com

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January 13, 2008

Dear Sir.

Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

On January 4<sup>th</sup>, 2008 after reviewing the weather forecast for the coming week and knowing my tanks were <sup>3</sup>/<sub>4</sub> full, I chose to do an initial sampling and turned this into Columbia Inspections, for analysis.

On January 8<sup>th</sup>, 2008 upon reviewing the analysis of elevated results and knowing that they exceeded the new parameters of the MAO, I immediately did a full inspection of all sumps, drain systems, lower and upper tank farm in order to understand the possible cause of the elevated findings. After finding no cause I decided to resample for more analysis. The tanks were full and there was 8 inches of water on the tank farm floor at the time of the 2<sup>nd</sup> sampling.

While waiting for results on the 2<sup>nd</sup> sampling, I inquired on the city's disposition of our request for a POTW permit. I was informed that the application met initial acceptance, but was still in the final stages of the permit process, for approval. Upon receiving that information, I filed immediately for a Temporary Batch Discharge Permit.

On January 9<sup>th</sup>, 2008 the results, on the 2<sup>nd</sup> sampling, came back much lower than the initial sampling, but still elevated.

On January 9<sup>th</sup>, 2008 the Temporary Batch Discharge Permit was granted. Hoses and materials were purchased to install a temporary connection to discharge to the City of Portland POTW. Although the city agreed to increase the flow from the normal 50gpm to 500gpm we could only pump when there was a "non rain event", 8 hours prior to and during the pumping. The rains restarted the afternoon of the 9<sup>th</sup> before we could begin pumping to the POTW and continued nonstop into the following day. So to be in compliance, I could not pump.

On January 10<sup>th</sup>, 2008 Thursday, with rain falling and 2 feet of water in the lower tank farm, I called to review with you the situation from the days prior and the results from Columbia Inspection. I also conveyed the steps I took to attempt to pump to the POTW and avoid discharge directly to the river. I explained that the lower tank farm was in imminent danger of catastrophic failure of equipment, potential danger of tanks floating, or possible environmental consequences if pumping did not commence immediately. You acknowledged that due to circumstances, the most viable option was immediate discharge to the river.

Sincerely,

T.J. Turner Koppers Inc

Plant Superintendent



January 4, 2008

Oregon Department of Environmental Quality Northwest Region 2020 SW Fourth Ave. Suite 400 Portland, OR 97201-4987 Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
let 503 286 3681
Fax 503 285 2831
www.koppers.com

Attention:

Elliot J. Zais

Sr. Environmental Engineer

Reference:

NPDES Permit No. 101642 Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of December 2007 results.

For the month, we had eight regular discharges of our 220,000 gallon storage tanks, for a total discharge of 1,760,000 gallons. These discharges of 220,000 gallons each were pumped on each of the following days in 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup>, 13th, 16<sup>th</sup>, 21<sup>ct</sup>, 28<sup>th</sup>, 30<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at 503-286-3681 or via e-mail at: <a href="mailto:turnerti@koppers.com">turnerti@koppers.com</a>

Sincerely,

T.J. Turner

Plant Superintendent

Cc: M. Pronold, City of Portland, Environmental Services

T. Self, KI S. Flynn, KI

PERMITTEE NAME/ADDRESS NAME	్రినించురణ Fadlity Name/L	ocation If Differen
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
[2-18] (47-5)

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

ADDRESS Koppers Inc.

7540 Nw Saint Helens Road to November 30, 2008 Portland, Or. 97210-3663

Interim Permit Limits Per MAO June 8, 2007

OR-000077-9 PERMIT NUMBER

001 DISCHARGE NUMBER

FACILITY Northwest Terminal LOCATION Multnomah County

47430 / 101642

MONITORING PERIOD YEAR MO DAY YEAR MO DAY 31 12 01 TO 87 12 FROM (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

☐Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER		(3 Card Only) QUA (46-53)	NTITY OR LCADII (54-61)	(22-23) (24- IG		JALITY OR CONCE (46-63)	NTRATION (64-61)		NO.	FREQUENCY OF	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMEM	AVERAGE	MAXIMUM	UNITS	(62-53)	ANALYSIS (64-68)	(69-70)
FLOW	SAMPLE MEASUREMENT		·	- CDD					0	N/A	CALC
SEE COVER LETTER	PERMIT REQUIREMENT			GPD							
TEMPERATURE	SAMPLE MEASUREMENT				7.0	8.2	9.7	o C		1/7	GRAB
I E, HI ERA I UKL	PERMIT REQUIREMENT				N/A	N/A	<25deg C.				
PH	SAMPLE MEASUREMENT				7,6	7.7	7.8	SU		1/7	GRAB
ra	PERMIT REQUIREMENT				6.5	N/A	8.5	36			
OIL & GREASE	SAMPLE MEASUREMENT				ND	2.3	5.5	mg/L		1/7	GRAB
OIL & GREASE	PERMIT REQUIREMENT	·			0.0	19	15				
	SAMPLE MEASUREMENT				ND	ND	ND			1/30	GRAB
PHENOLS	PERMIT REQUIREMENT				0.0	0.5	0.7	mg/L			
CYANIDE	SAMFLE MEASUREMENT				ND	N/A	ND			1/30	GRAB
CIANDE	PERMIT REQUIREMENT				0.0	N/A	8.5	ug/L			
POLY	SAMPLE MEASUREMENT				0.0	N/A	75.1	n a T		Qtr	GRAB
AROMATIC HYDROCARBONS	PERMIT REQUIREMENT			1	0.0	N/A	400	ug/L			
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER CORTE	Y LNDER PENALTY OF LAW THA MY DRECTION OR SUPERVISION AUT ED PERSCANEL PROFER	THIS DOCUMENT AND ALL A IN MACCORDANCE WITH A	ITTACKVENTS WES	SE PREPARED D TO ASSURE		· · ·	TELEPHON	E	D/A	TE
Leslie Hyde	TRATO: BASED I PERSON SUBMAN INCLUDI	ALF ED FETTECKHEL FROFER SIN MY INDUSTY OF THE PERS IS COTECTLY RESPONSELE: IS COTECTLY RESPONSELE: INDUSTRY OF THE PERSON OF THE AND THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF FINE THE POSSIBLITY OF THE PO	LY GATHER AND ENALIATE ON CA PERSONS INFO MAY FOR GATHERIVG THE INFO IDD/ILETGE AND BELEF, TR., IDANT PENAL TES FOR SUS AND IMPRISONMENT FOR I	THE BECREATION  ASS THE SYSTEM  RMATION, THE IN  E. ACCURATE, AN  METING FALSE IN  CLOWING VIOLATI	IS SUIT TO AN OR THOSE STORMATION OF COMPLETE SECREMENTS ON COMPLETE	ATURE OF PRINCIPAL		503) 286-36	81	08	1 04
TYPED OR PRINTED				ey include fres un	o \$16,600 and OF	FICER OF PRINCIPAL	ED AGENT A	ODE NUMB	ER	YEAR M	O DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dihenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

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PERMITTEE NAME/ADDRESS (Include Facility No NAME	eme/Location 7 Different)	MATICNAL POLLUTANT DISCHARGE ELIMINAFION SYSTEM (NFDES) DISCHARGE MONITORING REPORT (DMR) [2-16] [2-17]	Form Approved. OMB No. 2040-0004 Approval expires 05-31-98
ADDRESS Koppers Inc. 7540 Nw Saint Helens Road	Interim Permit Limits Per MAO June 8, 2007	OR-00077-9 001 PERMIT NUMBER DISCHARGE NUMBER	Approval expites 03-3 (-80
Portland, Or. 97210-3663 FACILITY Northwest Terminal	to November 30, 2008	MONITORING PERIOD  YEAR MO DAY YEAR MO DAY  Check here if No Discharge	ige
LOCATION Multnomah County	47430 / 101642	ROM 07 12 01 TO 07 12 31 NOTE: Read Instructions (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)	before completing this form

PARAMETER		(3 Card Only) QU/ (46-53)	ANTITY OR LOADIN (54-61)	(G	(4 Card Only) QL (38-45)	JALITY OR CONCE (46-53)	NTRATION (54-61)		NO.	FREQUENCY OF	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(E2-63)	ANALYSIS (64-68)	(69-70)
<b>D</b> ()	SAMPLE MEASUREMENT					3.3	3.3			1/30	GRAB
Benzo(a)anthracene	PERMIT REQUIREMENT			1 1	0.0	22	13	ug/L			
Panna (a) manana	SAMPLE MEASUREMENT			·		5.9	5.9	ug/L		1/30	GRAB
Benzo(a)pyrene	PERMIT REQUIREMENT				0.0	26	39	ugrL			
Paras (h) Shannan shanna	SAMPLE MEASUREMENT					5.9	5.9	ug/L		1/30	GRAB
Benzo(b)fluoranthene	PERMIT REQUIREMENT				0.0	15	27	ngr			
Benzo(k)fluoranthene	SAMPLE MEASUREMENT					4.6	4.6	ug/L		1/30	GRAB
Denzo(k)Huor animene	PERMIT REQUIREMENT				0.0	16	26				
Cl	SAMPLE MEASUREMENT					4.8	4.8			1/30	GRAB
Chrysene	PERMIT REQUIREMENT				0.0	20	27	ug/L			
Dibenzo(ah)anthracene	SAMPLE MEASUREMENT					0.7	0.7	ug/L		1/30	GRAB
Dipenzo(anjaniniacene	PERMIT REQUIREMENT				0.0	7	9	ug/L			
Bannana	SAMPLE MEASUREMENT					N/A	160	ng0		1/30	GRAB
Benzene	PERMIT REQUIREMENT				0.0	N/A	250	ug/L			
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER ICERT	Y INDER PENALTY OF LAWY THA MY DIRECT ON OR SUPERMSA JULF ED PERSONNEL FROPER	THIS DOCUMENTANDALLA	TACHWEYTS WE	RE PREPARED D TO ASSURE	- 100		TELEPHO	1E	0.4	TE
Leslie Hyde	CONTRACT CON	JALF PED PERSONNEL PROPER ON MY NOVIEW OF THE PERS US DIRECTLY RESPONSIBLE FEDIS, TO THE BEST OF MY KI ARE THAT THEME AS SIGNIF NO THE POSSIBILITY OF FILE INDIAND 33 V.3.C. J. 1213. [P. LIMITOGRAMMENT OF SUMBER 6 IN	E TRALERA DA SHARA CAME 'COMO OR SHARA SHARA CAME THE INFO FOR GATHERING THE INFO FOR SATHERING THE INFO THE SALE SATHERING THE SALE FOR SALE SALE SALE SALE SALE THE SALE SALE SALE SALE SALE SALE SALE SAL	THE INFORMATION AGE THE SYSTE AMATION, THE E ACCURATE, AM HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE HITTING FALSE	N SUBJUTTED. M, CR THOSE NFCRWATION D COMPLETE NFCRWATION COMP. SEE 14	Hours		503) 286-36 	81	08	1 04
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments hate)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzenc, BTEX and Cyanide.

Interim Permit Limits

Per MAO June 8, 2007

to November 30, 2008

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

D.SCHARGE MONITORING REPORT (DMR)
(17-19) OR-000077-9 001 D'SCHARGE NUMBER PERMIT NUMBER

MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM 07 12 01 TO 07 12 31

Portland, Or. 97216-3	3663 to	November 30, 20	<u> </u>		TORING PERIOD		☐Check here if i	Na Dischame			
FACILITY Northwest Terminal			YEAR 15			MO DAY	<del>-</del> -	•			
Multnomah County	47	430 / 101642	FROM 07	12 0 (22-23) (24-		12 31 28-29) (30-31)	NOTE: Read las	tructions before	e compi	eing this t	STATE:
PARAMETER (32-37)		(3 Card Only) QU (46-53)	ANTITY OR LOAD!			JALITY OR CONC (46-53)	ENTRATION (54-61)		NO.	FREQUENCY OF	SAMPLE TYPE
(02-01)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(32-53)	ANALYSIS (64-68)	(59-70)
BTEX	SAMPLE MEASUREMENT				0.0	N/A	394			1/30	GRA
DIEX	PERMIT REQUIREMENT				0.0	N/A	1,000	ug/L			
TURBIDITY	SAMPLE MEASUREMENT					-	22	NTU		1/30	GRA
	PERMIT REQUIREMENT										
Silver	SAMPLE MEASUREMENT				ND		ND	mg/L		1/30	GRA
511763	PERMIT REQUIREMENT				0.0		<u>.</u>	Infar			
Pentavalent Arsenic	SAMPLE MEASUREMENT				DN		ND	mg/L		1/30	GRA
	PERMIT REQUIREMENT				0.0						
Cadmium	SAMPLE MEASUREMENT				ND		0.063	mg/L		1/30	GRA
CHAMILIAN	PERMIT REQUIREMENT				0.0			night			
Copper	SAMPLE MEASUREMENT				ND		ND	mg/L		1/30	GRA
	PERMIT REQUIREMENT				0.0		. <u> </u>	11.00			
Mercury	SAMPLE MEASUREMENT				ND		ND	mg/L		1/30	GRA
	PERMIT REQUIREMENT				0.0						
METITLE PRINCIPAL EXECUTIVE	OFFICER LICENTEY	LINDER FEMALTY OF LAW THAT Y DIRECTION OR SLIPERVISION	THIS DOCUMENT AND ALL AT N MADCORDANCE WITH A S	TACHUENTS WER	É FRENRED TO ASSURE	n		TELEPHO	ΙĒ	.0	ATE
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TYPED OR PRINTED	U.S.C.§ 1	C1 AND 33 U.S.C. § 1319. (Pa impresentant of between 6 ma	rathe under these exhibs ma ords and 5 years.)	y induce free up t	SIGN.	ATURE OF PRINCIP FICER OR AUTHOR	AL EXECUTIVE IZED AGENT	AREA NUM	BER	YEAR	MO D/

PERMITTEE NAME/ADDRESS (Include Facility Names Location 7 Different) NAME

7540 Nw Saint Helens Road

Portland, Or. 97210-3663

ADDRESS Koppers Inc.

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dihenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

SIZNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

YEAR

NUMBER

TYPED OR PRINTED

Koppers002881

MO

DAY

#### MONTHLY NPDES - DMR - WORK SHEET

Month & Year:

December, 2007

MONTHLY FLOW DATA

Gallons per pumping(all 6

tanks) # of pump.

# of Days/Emer. Pump.

Emer. Gals.

Number of days during the month of Average "slug"

discharge per day

220,000

8

0

0

1,760,000

Total Gais.

#DIV/0!

Days of the month:

SAMPLE TEST RESULTS

										# of	l	LIMITS		80% of		<u>ACTUA</u>	<u>L</u>	1			
	1	2	3	4	5	6	7	8	9	10	11	12	Samples	min.	avg.	max.	Max.	min.	avg.	max.	นเ
Temperature	9.5	9.5	9.7	8.9	7.5	7.2	7.0	8.9	8.7	7,1	7.0	7.2	12	n/a	n/a	n/a	n/a	7.0	8.2	9.7	$\mathbf{T}^{\dagger}$
PH	7.7	7.8	7.6	7.7	7.7	7.8	7.8	7.6	7.7	7.6	7.8	7.6	12	6.0		9.0	n/a	7.6	7.7	7.8	7 \$
Oil & Grease	ND	ND	3.7	5.5									4	0	10	15	12	ND	2.3	5.5	] m
Turbidity	22												1							22	N
Benzo(a)anthracene	3.3		<del> </del>			<u> </u>		-	<del> </del>	-	<u> </u>		1		13	22				3.3	- u
Benzo(a)pyrene	5.9												1		26	39				5.9	1,
Benzo(b)fluoranthene	5.9												1		15	27				5.9	1 .
Benzo(k)fluoranthene	4.6												1		16	26				4.6	1
Chrysene	4.8												1		20	27				4.8	1 .
Dibenzo(ah)anthracene	0.7												1		7	9				0.7	1
Benzene	160												1	;	n/a	250				160	1
BTEX	394			Г									1		n/a	1000				394	1 ;
Cyanide	ND												1	. 0	п/а	8.5		ND	ND	ND	1.
Phenois	ND						1			1			1	0.0	0.5	0.7	0.56	ND	ND	ND	п

#### QUARTERLY PAH SAMPLING

Date sample taken:

Koppers002882

12/3/2007

Test Results:

ug/L

75.1

( Must be less than ) 400 ugl

PAGE: 1 OF 15



### CERTIFICATE OF ANALYSIS

CLIENT: Koppers Industries, Inc.

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

PROJECT NAME: Monthly NPDES

SUBMITTED: 12/03/07 14:00

REPORT DATE: 12/13/07 14:57 REPORT NUMBER: 7120310

CI SAMPLE	CLIENTS ID#		DATE	TIME N	ATRIX				
7120310-01	SWIank		12/03/	2007 1130 V	/ater				
7120310-01	SWłank		12/03/	2007 1130 V	/aler				
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME		NOTES
7120310-01	SAMPLE ID: SWIm	nk			٠.				
General Bench	Analysis		•						
CYANIDE, WEAK ACID	SM 4500-CN ).	CYANIDE, TOTAL	ND value, 0.0	mg/L	0,020	KMC	12/05/2007	13:00	Z-01
O & G, NP (SGT-HEM)	EPA 1664	NONPOLAR OIL & GREASE	ND	mg/L	2.0	DK	12/06/2007	11:23	
O & G, TOTAL (HEM)		TOTAL OIL AND GREASE	ND .	mg/L	2.0	DK	12/06/2007	11:23	
PHENOLS, TOTAL	EPA 420.1	TOTAL RECOVERABLE PHENOLICS	ND	mg/L	0.050	KMC	12/06/2007	12:54	
TURBIDITY	EPA 180.1	TURBIDITY	22	NTU	0.10	KMC	12/04/2007	18:30	
Total Mercury b	y Cold Vapor Atomi	c Fluorescence					, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
MERCURY CV AF	EPA 245.7/1631E	MERCURY	ND	mg/L	0.000050	KEL	12/06/2007	14:16	
Total Metals by	Inductively Coupled	l Plasma					V -4		
ARSENIC - ICP	EPA 200.7/G010B	ARSENIC	ND	mg/L	0.010	KEL	12/06/2007	14:18	
CADMIUM - ICP		CADMIUM	0,063	mg/L	0.003	KEL	12/05/2007	16:59	
COPPER - ICP		COPPER	ND	mg/L	0.005	KEL	12/05/2007	18:59	
LEAD - ICP		LEAD	0.023	mg/L	0,005	KEL,	12/05/2007	1G:59	
SELENIUM - ICP		SELENIUM	ND	mg/L	0.10	KEL	12/06/2007	14:18	
SILVER - ICP		SILVER	ND	mg/l.	0.010	KEL	12/06/2007	14:18	*****
TIN - ICP		TIN	NĎ	mg/L	0.040	KMC	12/11/2007	18:35	
ZINC - ICP		ZINC	0.064	mg/L	0.003	KEL	12/05/2007	16:59	
Volatile Organic	s by Gas Chromato	graphy/Mass Spectroscopy							
DTEX 624	EPA 624	BENZENE	0.16	mg/L	0,0005	JRW	12/06/2007	13:04	•
		TOLUENE	0.17	mg/L	0,0005				
		ETHYLBENZENE	0.0070	mg/L	0.0005				
		M- & P-XYLENE	0.036	mg/L	0.0005				
		O-XYLENE	0,021	mg/L	0.0005				
		Surrogate: Dibromollucromethane	73.0 %	%RECOVER	Y 50-150				
		Surrogato: Fluorobenzene	92.3 %	%RECOVER	Y 50-150				
		Surrogate: Chlorobenzeno-d5	107 %	%RECOVER	Y 50-150				
		Surrogate: 1,4-Dichlorobenzene-d4	83.1 %	%RECOVER	Y 50-150				

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Authorized for Release By:

James Weinkauf - Laboratory Director

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Ph;(503) 286-9464 Fax:(503) 286-5355 E-mail:citabqa@ColumbiaInspection.com



# CERTIFICATE OF ANALYSIS

	12/13/07 14:57	REPOR'	T NUMBER:7120	310	•		PAGE: 2 OF 1				
Sample/ Analysis	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	тесн	DATE/TIME	NOTE8			
7120310-01	SAMPLE ID: SWtank		· ·								
Semi-Volatile Org	ganies by Gas Chrom	atography/Mass Spectroscopy	,			. !					
PNAH 625	EPA 625 (SIM)	ACENAPHTHENE	7.3	ug/L	0.04	DM	12/04/2007 16:14				
	, ,	ACENAPHTHYLENE	2,4	ug/L	0.04	;					
		ANTHRACENE	1,6	ug/L	0.04	i					
		BENZO(H)ANTHRACENE	3.3	ug/L	0.04	:					
		BENZO(a)PYRENE	5.9	ug/L	0.04						
		BENZO(b)FLUORANTHENE	5.9	ug/L	0.04						
		BENZO(g,h,i)PERYLENE	4.3	ug/L	0.04						
		BENZO(k)FLUORANTHENE	4.6	ug/L	0.04						
		CHRYSENE	4.8	ug/L	0.04	:					
		DIBENZO(a,h)ANTHRACENE	0.7	ug/L	0.04						
		FLUORANTHENE	12.5	ug/L	0.04						
		FLUORENE	3.7	ոն\լ"	0.04						
•		INDENO(1,2,3-cd)PYRENE	4.0	ug/L	0.04	į					
		NAPHTHALENE	1.5	ug/L	0.04	:					
		PHENANTHRENE	3.3	ug/L	0.04						
		PYRENE	9.3	ug/L	0.04	ļ					
		Surrogate: 2-Fluoroblphenyl	81.6 %	<b>%RECOVERY</b>	50-160						
		Surrogate: Nitrobenzene-D5	69.5 %	%RECOVERY	<b>60-150</b>	:					
		Surrogate: p-lerphenyl-D14	71.4 %	%RECOVERY	50-150						

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Authorized for Release By:James Weinkauf - Laboratory Director

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Ph;(503) 286-9464 Fax;(503) 286-5355 E-mail:cliabqa@ColumbiaInspection.com

nie



December 3, 2007

Oregon Department of Environmental Quality Northwest Region 2020 SW Fourth Ave. Suite 400 Portland, OR 97201-4987

Carbon Materials and Chemicals 7540 NW Saint Helens Road Portland, OR 97210-3663

Tel 503 286 3681 Fax 503 285 2831

www.koppers.com

Koppers Inc.

Attention:

Elliot J. Zais

Sr. Environmental Engineer

Reference:

NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of November 07. This report includes the fourth quarter PAH test results.

For the month, we had three regular discharges of our 220,000 gallon storage tanks, for a total discharge of 660,000 gallons. This discharge of 660,000 gallons was pumped on each of the following days in November: 21<sup>st</sup>, 23<sup>rd</sup>, 24th. There were no excursions during the month.

If you have any questions, I can be reached at 503-286-3681 or via e-mail at: <a href="mailto:turnerti@koppers.com">turnerti@koppers.com</a>

Sincerely,

Cc:

-Plant Superintendent

M. Pronold, City of Portland, Environmental Services

T. Self, KI S. Flynn, KI

P2

PERMITTEE NAME/ADDRESS (IN NAME	ichide FaciBy NemerLocati	on if Different)	NATIONAL PO DISCI	ILLUIANI DISCH HARGE MON (2-15)	HANGE ELIMINATION SYS		Form Approved. OMB No. 2040-0004 Approval expires 05-31-98				
ADDRESS Koppers Inc. 7540 Nw Saint Helen		rim Permit Limit MAO June 8, 200		-000077-9 IT NUMBER	DISCH	001 ARGE NUMBER		·	.pp		
Portland, Or. 97210	-3663 to	November 30, 200			TORING PERIOD		☐Check here if No	n Dischame			
FACILITY Northwest Terminal LOCATION	1		FROM 07	MO DA		VIO DAT	NOTE: Read Instr	-	compl	atinn fhic f	nom.
Multnomah County	47	430 / 101642		(22-23) (24-2		8-29) (30-31)	NOTE. Read Hist	actions actors	CONTIN	emily tries	
PARAMETER		(3 Card Only) QUA (46-53)	NTITY OR LOADII (54-61)	NG	(4 Card Only) QU (38-45)	IALITY OR CONCE (48-53)	NTRATION (54-61)		NO.	FREQUENCY OF	SAMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX (62-63)	ANALYSIS (64-68)	TYPE (69-70)
FLOW	SAMPLE MEASUREMENT								0	N/A	CALC
SEE COVER LETTER	PERMIT REQUIREMENT		·	GPD							
TEMPERATURE	SAMPLE MEASUREMENT			j	9,8	10.1	10.4	] ° <sub>C</sub>		1/7	GRAB
TEME ERATURE	PERMIT REQUIREMENT				N/A	N/A	<25deg C.			ļ 	
PH	SAMPLE MEASUREMENT		·	j	7.6	7.7	7.8	∫ → su		1/7	GRAB
	PERMIT REQUIREMENT				6.5	N/A	8.5		<b> </b>		
OIL & GREASE	SAMPLE MEASUREMENT				ND	ND	ND	mg/L		1/7	GRAB
GIZ G GRENO	PERMIT REQUIREMENT				0.0	10	15				
PHENOLS	SAMPLE MEASUREMENT				ND	ND	ND	mg/L	<u> </u>	1/30	GRAB
·	PERMIT REQUIREMENT				0.0	0.5	0.7		_	 	<u> </u>
CYANIDE	SAMPLE MEASUREMENT				ND	ND	ND	ug/L	ļ .	1/30	GRAB
	PERMIT REQUIREMENT				0.0	N/A	8.5				<u> </u>
POLY AROMATIC	SAMPLE MEASUREMENT				34.65	34.65	34.65	ug/L		Qtr	GRAB
HYDROCARBONS	PERMIT REQUIREMENT				0.0	N/A	400				
NAME/TITLE PRINCIPAL EXECUTIV	/E OFFICER	Y UNDER PENALTY OF LAWTHAT MY CIRECTION OR SUPERVISION MUFFED PERSONNEL PROPERC	THE DOCUMENT AND ALLA	TTACHNENTS WER	E PREPARED TO ASSURE	<i>a</i> )	ノト	TELEPHO:		ļ	ATE
Leslie Hyde		IN THE PERSONNEL MOYEUR IN MY INCLUSY OF THE PERSON IS OBJECTLY RESPONSIBLE FI TED IS, TO THE SEST OF MY YOR ARE THAT THERE ARE SCONIFA MICH THE POSSIBILITY OF FINE A 1001 AND 30 U.S.C. § 1318. (Per				Herry	202	( <b>593)</b> 286-30 	i <b>8</b> 1	67	12 03
TYPED OR PRINTED	U.S.C. §	1001 AND 30 U.S.C. § 1319. (Per um imprisonment of between 6 ma	nthe and 5 years.)	ary include free up to	SIGN OF	AFURE OF PRINCIPA FICER OR AUTHORIZ	L EXECUTIVE ED AGENT	AREA NUM	BER	YEAR	MO DAY
COMMENTS AND EXPLANATION OF Per MAO of June 8, 2007. The				ozo(a)antb	racene, Benzo(a)	pyrene, Benzo(h			orant		
Dibenzo(ah)anthracene, PAHs'	-total, Benzene, 1	BTEX and Cyanid	e.								

FACILITY LOCATION	Northwest Terminal Multnomah County
	PARAMETER (32-37)
Ben	zo(a)anthracene
В	enzo(a)pyrene
Benz	o(b)Auoranthene
Benz	o(k)fluoranthene
	Chrysene
1	

ERMITTE IAME	E NAME/ADDRESS (Include Facility Na	me-Locaton (f Different)	NATIONAL POLLUTANT DISCHARGE ELI DISCHARGE MONITORINA [2-16]	
DDRESS	Koppers Inc.	Interim Permit Limits	OR-000077-9	001
	7540 Nw Saint Helens Road	Per MAO June 8, 2607	PERMIT NUMBER	DISCHARGE NUMBER
	Portland, Or. 97210-3663	to November 30, 2008	MONITORING	PERIOD

47430 / 101642

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM 01 07 30 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

☐Check here if No Discharge

NOTE: Read Instructions before completing this form

<del></del>	<del> </del>			(22-23) (24-		28-29) (30-31)	ATT LEVON				1
PARAMETER		(3 Card Cnly) QU/ (46-53)	ANTITY OR LOADIN (54-61)	4G	(4 Card Only) QU (38-45)	IALITY OR CONCE (46-53)	(54-61)		130. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
	SAMPLE MEASUREMENT			}	2.0	2.0	2.0			1/30	GRA
Benzo(a)anthracene	PERMIT REQUIREMENT				0.0	22	13	ug/L			
Panza(a)nymana	SAMPLE MEASUREMENT				2.5	2.5	2.5	ug/L		1/30	GRA
Benzo(a)pyrene	PERMIT REQUIREMENT				0.0	26	39	ug.L			
Para (h) Shararathana	SAMPLE MEASUREMENT				3.5	3.5	3.5			1/30	GRA
Benzo(b)Auoranthene	PERMIT REQUIREMENT	·			0.0	15	27	ug/L			<u> </u>
Benzo(k)fluoranthene	SAMPLE MEASUREMENT				2.6	2.6	2.6	ug/L		1/30	GRA
benzu(k)indoranimene	PERMIT REQUIREMENT			l. 	0.0	16	26				
	SAMPLE MEASUREMENT				3.1	3.1	3.1			1/30	GRA
Chrysene	PERMIT REQUIREMENT				0.0	20	27	ug/L			
Dibenzo(ah)anthracene	SAMPLE MEASUREMENT				0.7	0.7	0.7	ng/L		1/30	GRA
Dipenzo(anjanturacene	PERMIT REQUIREMENT				0.0	7	9	ug/L			
D	SAMPLE MEASUREMENT				ND	ND	ND	ug/L		1/30	GRA
Benzene	PERMIT: REQUIREMENT				0.0	N/A	250	I usr			
IAME/TITLE PRINCIPAL EXECUTIVE	OFFICER ICERTPY	ONCER PENALTY OF LAW THA Y DRECTION OR SUPERVISK	T THIS DOCUMENT AND ALL A'DN IN ACCORDANCE WITH AS	TIACHVENTS WES	IE PREPARED D TO ASSURE	4		TELEPHO	ΝE	D	ATE
Leslie Hyde	THAT CLIA BASED OF PERSONS SIBAUTTE   AMANA BCLIDIN	LIFED PERSONNEL PROPER MY MY INQUIRY OF THE PERS O DIRECTLY RESPONSIBLE O IS, TO THE SEST OF MY KN RE THAT THERE ARE SISSING O THE POSSIBLITY OF FIME	IT THIS DOCUMENT AND ALL AS NI IN ACCORDANCE WITH AS A LIV GETHER MID EVALUATE I ON DR FERSONS WHO MAN FOR GATHERING THE TAPO MIVELED FOR SUBMEDIES FOR SUBM	THE NEORMATION USE THE SYSTEM EMATION, THE N E. ACCUPATE, ALLSE IN USCULO VIOLETI UNICATION VIOLETI UN	A SURMAT ED M. OR THEOSE M. OR THEOSE M. OR THEOSE M. OF COMPLETE. HORMATION ONS. SEE 78	ATURE OF PRINCIPAL		(503) 286-3 <del>(</del>	81	07	12
TYPED OR PRINTED	U.S.C. § 10 or meaning	201 AND 33 U.S.C. § 1319. Pr n žirgifsozmeni ci četvesničim	erakles under hose statutes ma onches and 5 years.)	ay include lines up l	0 \$10,000 and 5961	ATURE OF PRINCIPAL FICER OR AUTHORIZ	ED AGENT	AREA NUM	BER	YEAR	MO D

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)finoranthene, Benzo(k)finoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

CC: M. Pronold, City of Partland: T. Self, KI: S. Flynn, KI (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

Form Approved. OMB No. 2040-0004

Approval expires 05-31-98

YEAR

NUMBER

SAMPLE TYPE

(69-70)

**GRAB** 

GRAB

GRAB

GRAB

GRAB

GRAB

GRAB

03

Portland, Or. 97210-3	663 to	November 30, 20			TORING PERIOD						
FACILITY Northwest Terminal LOCATION Multnomah County	47	430 / 101642	FROM 07 (20-21)	MO DA 11 0 (22-23) (24-	1 то 07	1410 DAI	Check here if No	•	re compi	leting this	form
PARAMETER		(3 Card Only) QU (46-53)	ANTITY OR LOAD!! (54-61)	VG	(4 Card Only) QI (38-45)	UALITY OR CONCE (46-53)	NTRATION (54-61)		NO.	FRECUENC	Y s
(32-37)		AVERAGE	MAXIMUM	UNITS	MUMINIM	AVERAGE	MAXIMUM	UNITS	(62-53)	J ANAI VOIC	5 l
Part	SAMPLE MEASUREMENT				ND.	ND	ND			1/30	6
BTEX	PERMIT REQUIREMENT	-			0.0	N/A	1,000	ug/L			T
TURBIDITY	SAMPLE MEASUREMENT				10	10	10			1/30	G
TURBIDIT T	PERMIT REQUIREMENT				0.0		10	mg/L			1
511	SAMPLE MEASUREMENT				ND	ND	ND			1/30	G
Silver	PERMIT REQUIREMENT				0.0			mg/L			T
P. A14.A.	SAMPLE MEASUREMENT				ND	ND	ND			1/30	G
Pentavalent Arsenic	PERMIT REQUIREMENT				0.0			mg/L			1
	SAMPLE MEASUREMENT				ND	ND	ND			1/30	G
Cadmium	PERMIT REQUIREMENT				0.0			mg/L			T
Compa	SAMPLE MEASUREMENT				ND	ND	ND			1/30	G
Copper	PERMIT REQUIREMENT				0.0			mg/L			Γ
	SAMPLE MEASUREMENT				ND	ND	ND			1/30	G
Mercury	PERMIT REQUIREMENT		·		0.0			ng/L			T
NAME/TITLE PRINCIPAL EXECUTIVE		FY LNOER PESALTY OF LAWTH MY DRECTION OR SUPERVIS	IAT THIS DOCLMENT AND ALL A ION MACCORDANCE WITH A	CTACHNENTS WER SYSTEM DESIGNAL	TO ASSURE		/	TELEPHON	E	D.	ATE
Leslie Hyde		MILLER OF THE SONNEL PROPE KLUERO FERSONNEL PROPE PER PER SON THE PER SON THE PER SON MILLE MILLER THE PER SON THE MILLER PER SIGN MILLER POSSIBLITY OF FIN				Mar		)3) 286-36 	81	07	12
TYPED: OP PRINTED	U.S.C.	1001 AND 33 U.S.C. § 1319. G	Peruities under these statutes m Conting and 5 years.)	ay include fines up to	\$19,000 and SIGN	ATURE OF PRINCIPAL FICER OR AUTHORIZE	EXECUTIVE ARE	A MINO	<del></del> +		

NATIONAL POLLLITANT DISCHARGE ELIMINATION SYSTEM (NPDES) ONAL POLLUTANT DISCHARGE ELIMINATION 315 IEM (N. DISCHARGE MONITORING REPORT (DMR)

001

DISCHARGE NUMBER

OR-000077-9

PERMIT NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene,

OFFICER OR AUTHORIZED AGENT

TYPED OR PRINTED

Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

Koppers002888

PERMITTEE NAME/ADDRESS (Include Facility Name/Location & Crifferent)

7540 Nw Saint Helens Road

Interim Permit Limits

Per MAO June 8, 2007

NAME

ADDRESS Koppers Inc.

PERMITTE NAME	E NAME/ADDRESS (Act	ude Facility Namelloc	ation if Different)	NATIONAL PO DISCH	ILLUTANT DISCH HARGE MON (2-18)	HARGE ELIMINATION SYS IITORING REPORT	STEM (NPCES) (DMR) (17-19)			)MB Ni	pproved. o. 2040-0 al expires		. OR
ADDRESS	Koppers Inc. 7540 Nw Saint Helens		terim Permit Lin r MAO June 8, 2		-000077-9 IIT NUMBER		001 ARGE NUMBER		ř	rhbiova	n expires	. U3-3 1	-90
FACILITY LOCATION	Portland, Or. 97210-3 Northwest Terminal Multnomah County		November 30, 2	FROM 07		1 TO 07	NIC DAT	□Check here if No	•	compl	leting this	; form	
	PARAMETER (32-37)		(46-63)	UANTITY OR LOADIN (54-61)		(38-45)	ALITY OR CONCE (48-53)	(54-61)		NO. EX	FREQUEN OF ANALYSI	s   Š	AMPLE TYPE
		SAMPLE MEASUREMEN	AVERAGE	MUMIXAM	UNITS	ND	AVERAGE ND	MAXIMUM ND	UNITS	(62-63)	1/30	+	9-70) RAB
	Lead	PERMIT REQUIREMENT				0.0			mg/L		1.00	+	
	Tin	SAMPLE MEASUREMEN	r .			NÐ	ND	ND	mg/L		1/30	G	RAB
	1111	PERMIT REQUIREMENT				0.0			l light				
	Selenium	SAMPLE MEASUREMEN	г			ND	ND	ND	mg/L		1/30	G	RAB
	Selection	PERMIT REQUIREMENT	· <u> </u>			0.0			mg/L				
	Zinc	SAMPLE MEASUREMEN	r			ND	ND	ND	mg/L		1/30	G	RAB
		PERMIT REQUIREMENT	•			0.0							
		SAMPLE MEASUREMEN	r L										
		PERMIT REQUIREMENT		-									
		SAMPLE MEASUREMEN											
		PERMIT REQUIREMENT											
	•	SAMPLE MEASUREMEN	r.										
		PERMIT REQUIREMENT	1									T	
NAME/TITL	PRINCIPAL EXECUTIVE	OFFICER ICENT	FY UNDER PENALTY OF LAWY MY DIRECTION OR SUPERA	HATTHIS DOCUMENT AND ALL AS	TYACHMENTS WER	E PREPARED TO ASSURE	a		TELEPHON	E		DATE	
	Leslie Hyde	THATS BASES PERSI SUBMI	ICALIFIED PERSONNEL PROP I ON MY INCLIRY OF THE PE INS DIRECTLY RESPONSIBL ITTED S. TO THE BEST OF MY WARE THAT THERE ARE SIGN ING THE POSSIBILITY OF FU	HAT THIS DOCUMENT AND ALE AS SON IN ACCORDANCE WITH A SERLY SATTER AND PEAL THAT AS SON OR PERSONS (WHO MAN BE FOR GATHER NG THE INFO KNOWLEDGE AND BELIEF, THU INFOAMP PEAL THE STOR SLEEN BE AND AMPRISCHMENT FOR INFOAMP SHORT THE INFOAMP SHORT TH	THE DECRMATION MAGE THE SYSTEM PRIVATION, THE IN BE ACCURATE, AND MITTING FALSE IN RICKYNG YICLATE	SUBMITTED. A, OR THOSE FORMATION COMPLETE FORMATION XNS. SEE 18	ATHER OF BOIL OF		(503) 286-36	81	67	12	03
	TYPED OR PRINTED						ATURE OF PRINCIPA FICER OR AUTHORIZ	ED AGENT	AREA NUME		YEAR	МО	DAY
COMMENTS Per MAO	SAND EXPLANATION OF of June 8, 2007. The in	ANY VIOLATION terim timets a	S (Reference all atte re referenced for	chments here) the following; Ber	uzo(a)anth	racene, Benzo(a)	pyrene, Benzo(l	)fluoranthene,	Benzo(k)flu	orani	hene, C	bryse	ene,

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPCES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

Dihenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

PERMITTEE NAME/ADDRESS (Actude Facility Name Location 1 Different)

#### **MONTHLY NPDES - DMR - WORK SHEET**

Month & Year:

November, 2007

MONTHLY FLOW DATA

Gallons per pumping(all 6 tanks)

# of pump.

# of Days/Emer. Pump.

Emer. Gals.

Number of days during the month of Average "slug"

discharge per day

220,000

3

٥

0

Total Gals. 660,000

#DIV/0!

Days of the month:

#### **SAMPLE TEST RESULTS**

									#of	i	LIMITS	<b>.</b>	80% of	l/	<u>ACTUA</u>	<u>L</u>	f				
	1	2	3	4	5	6	7	8	9	10	11	12	Samples	min.	avg.	max.	Max.	min.	avg.	max.	unit
Temperature	10.4	10.1	9.8	10.0				$\top$					4	nia	n/a	n/a	п/а	9.8	10.1	10.4	C
PH	7.6	7.6	7.7	7.8				T					4	6.0		9.0	n/a	7.6	7.7	7.8	ຣບ
Oil & Grease	ND												1	0	10	15	12	ND	ND	ND	mg/L
Turbidity	10.0												1	0		10		10	10	10	i
Senzo(a)anthracene	2.0	<del> </del>	<del></del>	<del>  </del>		<del>                                     </del>		+	<del> </del>			<del> </del>	1		13	22		2.0	2.0	2.0	ugi
Benzo(a)pyrene	2.5												1		26	39		2.5	2.5	2.5	ugi
Benzo(b)fluoranthene	3.5												1		15	27		3.5	3.5	3.5	ugl
Benzo(k)fluoranthene	2.6				ſ		1						1		16	26		2.6	2.6	2.6	ugl
Chrysene	3.1							1					1		20	27		3.1	3.1	3.1	ugi
Dibenzo(ah)anthracene	0.7							T					1		7	9		0.7	0.7	0.7	ugi
Benzene	ND				1			1					1		n/a	250		ND	ND	ND	ugl
BTEX	ND												1		n/a	1000		ND	ND	ND	ugi
Cyanide	ND							1					1	0	n/a	8.5		ND	ND	ND	ugi
Phenois	ND												1	0.0	0.5	0.7	0.56	ND	ND	ND	mg/L

#### QUARTERLY PAH SAMPLING

Date sample taken:

11/19/2007

Test Results:

34.65

ug/L

( Must be less than ) 400 ugl

FRÖM : KOPPERS



### CERTIFICATE OF ANALYSIS

CLIENT: Koppers Industries, Inc.

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

PROJECT NAME: Monthly NPDES

SUBMITTED: 11/19/07 10:30

REPORT DATE: 11/26/07 14:16

REPORT NUMBER: 7111901

PAGE: 1 OF 15

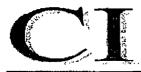
CI SAMPLE	CLIENTS ID#		DATE	TIME	MATRIX			*
7111901-01	SWiank		11/19/		Water		٠	
7111901-01	SWtank		11/19/	2007 1030 1	Vater			
SAMPLE/ ANALYSIS	метнор	PARAMETER	REBULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME	NOTES
7111901-01	SAMPLE ID: SWtank							
General Bench	Analysis							
CYANIDE, WEAK ACID	SM 4500-CN I.	CYANIDE, TOTAL	ND value, 0.0	mg/L	0.020	KMC	11/21/2007 14:68	Z-01
O & G, NP (SGT-HEM)	EPA 1864	NONPOLAR OIL & GREASE	ND	mg/L	2.0	KMC	11/21/2007 16:04	
O & G, TOTAL (HEM)		TOTAL OIL AND GREASE	ND	mg/L	2.0	KMC	11/21/2007 16:04	
PHENOLS, TOTAL	EPA 420.1	TOTAL RECOVERABLE PHENOLICS	ND	rng/L	0.050	KMC	11/21/2007 15:00	
TURBIDITY	EPA 180.1	TURBIDITY	10	עדע	0.10	KMC	11/21/2007 12:59	
Total Mercury by	y Cold Vapor Atomic F	luorescence	,				. , ,	-11.
MERCURY CV AF	EPA 245.7/1631E	MERCURY	ŊD	mg/L	0.00020	KMC	11/21/2007 15:27	A-01
Total Metals by	Inductively Coupled P	lasma		237834		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	T -601 (days and a second second second second second second second second second second second second second	Law
ARBENIC - ICP	EPA 200.7/6010B	ARSENIC	ND	mg/L	0.009	KMÇ	11/20/2007 16:38	
CADMIUM - ICP	14.00	CADMIUM	ND	mg/L	0.003	KMC	11/20/2007 16:38	
COPPER - ICP	- 110 Page Na Anguar ang ang ang ang ang ang ang ang ang ang	COPPER	ND	mg/L	0,004	KMC	11/20/2007 16:88	
LEAD - ICP		LEAD	ND	mg/L	0.004	KMC	11/20/2007 16:38	
SELENIUM - ICP	,	SELENIUM	ND	mg/L	0.090	KMC	11/20/2007 16:38	-\\ . <del></del> _
SILVER - ICP		SILVER	ND	mg/L	0.009	KMC	11/20/2007 16;38	
TIN - ICP	m was a first than the same of	TIN	ND	mg/L	0.036	KMC	11/20/2007 16:38	
ZINC - ICP	* 1 ° · · · · · · · · · · · · · · · · · ·	ZINC	ND	mg/L	800.0	KMC	11/20/2007 16:38	
Voiatile Organic	s by Gas Chromatogra	aphy/Mass Spectroscopy				)		
BTEX 8280	EPA 6260	BENZENE	ND	ug/L	0.60	JRW	11/20/2007 13:07	
		TOLUENE	ND	ນg/L	0.60			
		ETHYLBENZENE	ND	ug/L	0.50			
	•	M- & P-XYLENE	ND	ug/L	0.50			
		O-XYLENE	ND	ug/L	0.50			
	•	Surrogate: Dibromoflucromethane	72.7 <b>%</b>	%RECOVER	Y 50-150			
		Surrogate: Fluorobenzene	112 %	%RECOVER	Y 50-150			
	. '	Surrogate: Chlorobenzene-d5	108 %	%RECOVER	Y 50-150			
		Surrogate: 1,4-Dichlorobenzene-d4	88.1 %	%RECOVER	Y 50-150			

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Authorized for Release By:

James Weinkauf - Laboratory Director

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Ph;(503) 288-9464 Fax:(503) 288-5355 E-mail:cilabqa@Columbiainspection.com



### CERTIFICATE OF ANALYSIS

REPORT DATE:	11/26/07 14:16	REPORT		PAGE: 2 OF 15				
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME	NOTES
7111901-01	SAMPLE ID: SWitank							
Semi-Volatile Org	ganics by Gas Chron	natography/Mass Spectroscopy					÷	
PNAH 8270	EPA 8270M (SIM)	ACENAPHTHENE	0.5	ug/L	0.05	DM	11/21/2007 18:30	
	, ,	ACENAPHTHYLENE	0.05	ug/L	0.05			
		ANTHRACENE	0,5	ug/L	0.05			
		BENZO(a)ANTHRAÇENE	2.0	ug/L	0,05			
		BENZO(a)PYRENE	3.5	ug/L	0.05			
		BENZO(b)FLUORANTHENE	3.5	ug/L	0.05			
		BENZO(g,h,l)PERYLENE	2.5	ug/L	D.05			
		BENZO(k)FLUORANTHENE	2.6	ug/L	0.05			
		CHRYSENE	3.1	ug/L	0.05		•	
		DIBENZO(a,h)ANTHRACENE	0.7	ug/L	0.05			
		FLUORANTHÈNE	8,2	ug/L	0.06			
		FLUORENE	0,4	ug/L	0.05			
		INDENO(1,2,3-cd)PYRENE	2.5	ug/L	0.05			
		NAPHTHALENE	0.2	ug/L	0.05			
		PHENANTHRENE	1.8	ug/L	0.05		•	
		PYRENE	4.6	ug/L	0.05			
		Surrogate: 2-Fluorobiphenyl	75.3 %	%RECOVERY	50-150			•
		Surrogate: Nitrobenzene-D5	90.1 %	%RECOVERY	50-150			
		Surrogato: p-temphenyl-D14	77.5 %	%RECOVERY	60-16Q			

34.65

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COLUMBIA INSPECTION, INC 7133 N. Lomberd, Portland, OR 97203 Ph:(503) 286-9464 Fax:(503) 286-5355 E-mail:cilabqa@ColumbiaInspection.com

Cile

Coppers

November 13, 2007

Oregon Department of Environmental Quality Northwest Region 2020 SW Fourth Ave. Suite 400 Portland, OR 97201-4987 Koppers Inc.

Carbon Materials and Chemicals 7540 NW Saint Helens Road Portland, OR 97210-3663 Tel 503-286-3681 Fax 503-285-2831 www.koppers.com

Attention:

Elliot J. Zais

Sr. Environmental Engineer

Reference:

NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of October 07. This report includes the fourth quarter PAH test results.

For the month, we had five regular discharge of our 220,000 gallon storage tanks, for a total discharge of 1,100,000 gallons. This discharge of 1,1000,000 gallons was pumped on each of the following days in October: 4<sup>th</sup>, 5<sup>th</sup>, 23<sup>rd</sup>, 24<sup>th</sup>, and 27th. There were no excursions during the month.

If you have any questions, I can be reached at 503-286-3681 or via e-mail at: <a href="mailto:turnerti@koppers.com">turnerti@koppers.com</a>

Sincerely,

ルJ.J. Turner

Plant Superintendent

Cc:

M. Pronold, City of Portland, Environmental Services

T. Self, KI S. Flynn, KI

5L....365355

p.2

Lab Coordinator

# CERTIFICATE OF ANALYSIS

ا مر	_			1 has 4			- "		
CLIENT		ens Road		PROJEC	rname:	NPDES Perm	nit Ren	ewal Tests	
FAX				SUBI	ATTED:	10/02/07 13:1	0		
DATE: 1	1/13/07 11:27	, , , , , , , , , , , , , , , , , , ,	REPORT NUM	BÉR: 71002	<del>2</del> 06	<u> </u>	**************************************	PAGE	1 OF
	JENTS ID#			DATE 10/02/	TIME 2007 1100	MATRIX Water			· · · · · · · · · · · · · · · · · · ·
ME	THOD PA	RAMETER		RESULTS	UNITB	DETECTION LIMIT	TECH	DATE/TIME	NOTE
Ben th Anal									
MEAK SM		(ANIDE, TOTAL (ANIDE, TOTAL		ND value, 0.00	mg/L 8 mg/L	0,020 0.020	KMC	11/12/2007 1前(0)	5 C-04 - Z-01
en oluv/Amalyta	•		ch Analysis	Spike So	urce	WREC	RPD	RPD Limit	Notes
Batish 7K12	010 - General Prep	aration							
CITAL	(7K12010-BLK1) Spike (7K12010-MS1)	ND 0.0440	0.020 mg/L Source: 710 0.020 mg/L			Hyzed: 11/12/07 Hyzed: 11/12/07 110 80-120		The second secon	
alifiers: Note				· · · · · · · · · · · · · · · · · · ·		***** · · · · · · · · · · · · · · · · ·			
	sample was analyzed (	outside the EP.	commended holding	g time.					
ND V	alue, 0.008						<del></del>		
}.									

MBIA INSPECTION, INC 7133 N. Lombard, Portla v. OR 97203 Ph:(503) 288-9464 Fax:(503) 288-5355 E-mail:cliabqa@ColumbiaInspection.com

Authorized for Release By:

James Weinkauf - Laboratory Director



# CERTIFICATE

CLIENT: Koppers Industries, Inc.

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

PROJECT NAME: NPDES Permit Renewal Tests

SUBMITTED: 10/02/07 13:10

REPORT DATE: 10/03/07 16:45

REPORT NUMBER: 7100206

PAGE: 1 OF 1

CISAMPLE	CLIENTS ID#		DATE		TRIX .			
7100208-01	Discharge		10/02	/200/ 1100 Wa	1661			
SAMPLE! ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME	
7100206-01 General Bench A O & G, TOTAL (HEM) PHENOLS, TOTAL TURBIDITY	SAMPLE ID: Dischar nalysis EPA 1664 EPA 420.1 EPA 180.1	TOTAL OIL AND GREASE TOTAL RECOVERABLE PHENOLICS TURBIDITY  PATOGRAPHTHENE ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(b)FLUORANTHENE BENZO(b)FLUORANTHENE BENZO(b)FLUORANTHENE CHRYSENE DIBENZO(a,n)ANTHRACENE FLUORANTHENE FLUORANTHENE FLUORANTHENE FLUORANTHENE FLUORANTHENE FLUORANTHENE FLUORANTHENE FLUORANTHENE FLUORANTHENE FLUORANTHENE PHENANTHRENE PHENANTHRENE PYRÈNE Surrogate: 2-Fluorobiphenyl	4.2 ND	mg/L mg/L ug/L ug/L ug/L ug/L ug/L ug/L ug/L u		ko ko ko	10/03/2007 14:20 10/03/2007 13:00 10/03/2007 11:30 10/03/2007 17:12	
		Surrogate: Nitrobenzens-D5	83.3 %	%RECOVERY				
•		Surrogate: p-terphenyl-D14	89,5 %	%RECOVERY	50-150			



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Charles Morrow - Laboratory Director

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### CERTIFICATE OF ANALYSIS

REPORT DATE:	09/12/07 12:59	REPORT	PAGE: 2 OF					
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	REPORTING LIMIT	TECH	DATEMINE	NOTE
7082210-01	SAMPLE ID: Stormw	ator Tanks						
Volatile Organics	by Gas Chromatogra	aphy/Mass Spectroscopy						
VOC 824 Extended	EPA 624	CHLOROBENZENE	ND	mg/L	0,0005	JRW	08/29/2007 15:08	
		CHLOROFORM	ND	mg/L	0,0005			
		1,2-DICHLOROETHANÉ	ND	mg/L	0.0005			
		TRICHLOROSTHYLENS	ND	mg/L	0.0005			
•		Surrogato: Dibromofluoromethane	88.9 %	<b>%RECOVERY</b>	50-160			
		Surrogale: Fluorobenzene	106 %	%RECOVERY	50-150		•	
		Surrogate: Chlorobenzene-d5	99.7 %	%RECOVERY	50-150			
•		Surrogate: 1,4-Dichtorobenzene-d4	86.1 %	%RECOVERY	60-150			
Semi-Volatile Or	ganics by Gas Chron	atography/Mass Spectroscopy	•••					******
ACID SEMIVOLS 825	EPA 625	PENTACHLOROPHENOL	ND	mg/L	0.0120	MQ	08/28/2007 00:45	
		Surrogale: Phenol-d6	27.3 %	%RECOVERY	15-150			
		Surrogale: 2,4,6-Tribromophenol	89.2 %	%RECOVERY	50-150			
B/N SEMIVOL 626		2,4-DINITROTOLUENE	ND	mg/L	0.00240	рм	08/28/2007 00:45	
		NITROBENZENE	ND	mg/L	0.00240			
		Surrognite: 2-Fluoropiphenyl	38.9 %	%RECOVERY	50-150			
		Surrogate: Nitrobenzene-D5	53.8 %	%RECOVERY	50-150			
		Surrogato: p-terphenyl-D14	67.3 %	%RECOVERY	5D-15D			
Semi-Volatile On	ganics by Gas Chron	natography/ECD			, , ,			
PESTICIDES 625	EPA 625	CHLORDANE	ND	mg/L	0,00400	crm	09/06/2007 16:36	
		ALPHA-CHLORDANE	ND	mg/L	0.00400			
		GAMMA-CHLORDANE	ND	mg/L	0.00400			
General Petroleu	ım Analysis		« ·· · · · ·			•		
FLASH POINT - PM A,F	•	FLASH POINT	>212	DEG. F		MC	08/31/2007 17:16	F-03
1717								

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7133 N. Lombard, Portland, OR 97203 Phone:(503) 286-9464 Fax:(503) 286-5355 E-mail:lab@ColumbiaInspection.com

Authorized for Release By:Ct Charles Morrows

Field



# CERTIFICATE OF ANALYSIS

CLIENT: Koppers Industries, inc.

ATTN: T.J. Turner

7540 NW St. Holens Road Portland OR, 97210-3663

PHONE: (503) 286-3681

FAX: (503) 286-2831

PROJECT NAME: POTW Discharge

SUBMITTED: 08/22/07 14:22

REPORT DATE: 09/12/07 12:59

REPORT NUMBER: 7082210

PAGE: 1 OF 12

CI SAMPLE	CLIENTS IO#		DA	TE	TIME	MATRIX			
7082210-01	Stormwaler Tanks		08	/22/2007	1100	Water	_		
7082210-01	Stormwater Tanks		OB	/22/2007	1100	Water			
Sample/ Analysis	METHOD	PARAMETER	RESULTS	UN	ITS	REPORTING LIMIT	TECH	DATE/TIME_	NOTES
7082210-01	SAMPLE ID: Storm	water Tanks					•		
General Bench A	\nalysis								•
BOD	EPA405.15M5210B	5-DAY BOD TEST	6.66	mg	/L	5.00	kc	08/20/2007 14:45	
CYANIDE, TOTAL	SM 4500-CN-B,C	CYANIDE, TOTAL	0.010	mg	/L	0.0030	kc	08/28/2007 16:19	•
O & G, NP (SGT-HEM)	EPA 1664	NONPOLAR OIL & GREASE	3.1	mg	/L	2.0	kc	08/28/2007 16:47	
O & G, TOTAL (HEM)	10 mm	TOTAL OIL AND GREASE	11.4	mg		2.0	ko	08/27/2007 16:48	
РH	EPA 150,1/9040	pH	7,15	รม			kc	08/22/2007 18:45	••••
		TEMPERATURE (C)	21.5	SU					
SULFIDE	EPA 376.1	SULFIDE	ND	mg	/L	1.0	kc	08/27/2007 16:19	····
SUSPENDED SOLIDS	EPA160.2/SM2540	TOTAL SUSPENDED SOLIDS	ND	mg	Æ.	5.00	kc	08/29/2007 16:17	
Total Mercury by	Cold Vapor Atomic		• • • • • • • • • • • • • • • • • • • •		• •		•		• . " • •
MERCURY CV AF	EPA 245,7/1831E	MERCURY	NĎ	mg	/L.	0.000050	KEL	08/30/2007 11:21	
Total Metals by I	nductively Coupled	Plasma							
ARŞENIC - ICP	EPA 200,7/6010B	ARSENIC	ND	mg	/Ľ	0.010	KEL	09/06/2007 13:07	
CADMIUM - ICP	•	CADMIUM	· ND	mg	/L	0,003	KEL	09/06/2007 13:07	• • • • • •
CHROMIUM - ICP	**************************************	CHROMIUM	ND	mg/		0.005	KEL	09/06/2007 13:07	
COPPER - ICP		COPPER	ND	 mg/		0.005	KEL	09/06/2007 13:07	
LEAD - ICP		LEAD	ND	mg/		0.005	KEI.	09/06/2007 13:07	
MOLYBOENUM -	* * * * * * * * * * * * * * * * * * *	MOLYBDENUM	ND	mg		0,005	KE).	09/08/2007 13:07	
NICKEL - ICP	*** *** *****	NICKEL	ND	mg/	/L	0,020	KEL	09/05/2007 13:07	
SELENIUM - ICP		SELENIUM		mg/		0,10	KEL	09/06/2007 13:07	
SILVER - ICP	** * *****	SILVER	ND	mg/		0,010	KEL	09/08/2007 13:07	•
ZINC - ICP		ZING	ND	 my/		0.003	KEL	08/06/2007 13:07	
Volatile Organics	by Gas Chromaton	raphy/Mass Spectroscopy	·. <del>-</del>		<del>-</del>			00.0012001 (0.07	• :
	EPA 824	ACRYLONITRILE	ND	1	11	0.0100	1537.65		
	the to the	BENZENE	ND ND	mg/ mg/		0,0100 0,0005	JRW	00/29/2007 15:08	

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Authorized for Release By:

Charles Morrow - Laboratory Director

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone:(503) 286-8464 Fax:(503) 286-5355 E-mail:tab@ColumbiaInspection.com

PERMITTEE NAME/ADDRESS (Inc. NAME	NATIONAL POLLUTIANT DISCHARGE ELMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR) 17-18;  OR-090077-9 001					Form Approved OMB No. 2040-0004 Approval expires 05-31-98							
ADDRESS Koppers Inc.			im Permit Limi			<sub>=</sub>	001 SCHARGE NUMBER						
7540 Nw Saint Helen			WAO June 8, 201	· · · · · · · · · · · · · · · · · · ·	MUMBER								
Portland, Or. 97210-	3663	to N	vovember 30, 20			TORING PERIO		Check here if No.	Dischama				
FACILITY Northwest Terminal LOCATION				FROM 07			MO DAY 10 31		_			·	
Multnomah County		474	30 / 101642		10 0: (22-23) (24-2		) (28-29) (30-31)	NOTE: Read Instru	ictions befor	e comp	នរាយិសៈខេ រ	OF. II	
		7	(3 Card Only) QUA	ANTITY OR LOADIN			QUALITY OR CONCE	NTRATION		110	FREQUENC	y	
PARAMETER (32-37)			(46-53)	(54-61)		(38-45)	(46-53)	(54-61)		NO. EX	OF ANALYSIS	300	MPLE YPE
(02-01)			AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MUMEXAM	UNITS	(62-63)	(64-68)	(69	<del>3</del> -70)
FLOW	SAMPLE MEASUREM									0	N/A	CA	ALC
SEE COVER LETTER	FERMIT REQUIREME				GPD								
TEMPERATURE	SAMPLE MEASUREM					12.2	14.6	21.1	C		1/7	Gl	RAB
TEMPERATURE	PERMIT REQUIREME		·			N/A	N/A	<25deg C.				1	
РН	SAMPLE MEASUREME					7.2	7.5	7.8	SU		1/7	GI	RAB
	PERMIT REQUIREMS	NT				6.5	N/A	8.5					
OIL & GREASE	SAMPLE MEASUREM					4.2	5.5	6.7	mg/L		1/7	G	RAB
	PERMIT REQUIREME	NT				0.0	10	15					
PHENOLS	SAMPLE MEASUREME					ND	ND	ND	l mg/L		1/30	G	RAB
THEROES	PERMIT REQUIREME	NT				0.0	0.5	0.7	Ing/L				
CYANIDE	SAMPLE MEASUREME					8.0	8.0	8.0	ug/L		1/30	G	RAB
	PERMIT REQUIREME	NT				0.0	N/A	8.5					
POLY AROMATIC	SAMPLE MEASUREME					10	19	10	ug/L		Qtr	G	RAE
HYDROCARBONS	PERMIT REQUIREME	NT				0.0	N/A	400					
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER ic	ERIFY LI	NEER PENALTY OF LAW THA	THE DOCUVENTAKEAL AT	TALE-KENTS NEA	E PRZPARZD		·	TELEPHO	NE		DATE	
Leslie Hyde	TH BA PE SU 1A	ATOLALI ISED ON I REDNE I IEVITTED LLI AYARE CLEDING	IF 23 FERSONNEL PROPERS MY INDURY OF THE PERSI DIRECTLY RESPONSIBLE IF 119, TO THE BEST OF MY KY E THAT THERE ARE SIGNED THE POSSIBILITY OF FINE.	THE DOCUMENT MEAL AT NIBACCORONNE WITH AS IN GATHER AND EVALUATE TO DUTOR FERSONS WITH MEAN OR GATHERING THE INFO OWNED OF AND THE INFO OWNED OF AND THE INFO OWNED OF AND THE RESULTS FOR AND THE RESOURCE OF AND THE RESOURCE OF THE RESOURC	HE INFORMATION  MGE THE SYSTEM  ENATION, THE IN  E ACCUPATE, AND  UITTING FALSE IN  NOWING VIOLATE	SUBMETTED.  1. OR THUSE FORWATION OCOMPLETE.  FORMATICN ONS. SEE 18	IGNATURE OF PRINCIP	AL EVECUTIVE	503) 286-3	681	07	11	13
TYPED OR PRINTED	ü.s	5.C. § 100 nextn:mi	r: AND 33 U.S.C. § 1319. (Pe Impressionent et bemeen 6 m	(militas utsday tilead statutes ma ortus and 5 years.)	ny include Pres up k	2 2 13 CGC R1:1	OFFICER OR AUTHOR	IZED AGENT	AFEA NUA	IBER	YEAR	МО	DA

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all stachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

Koppers002898

13

NATIONAL POLLUTANT CISCHARGE ELIMINATION SYSTEM (NPCES)
DISCHARGE MONITORING REPORT (DMR)
(27-18)
(17-19)

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

ADDRESS Koppers Inc.

FACILITY LOCATION

7540 Nw Saint Helens Road

Northwest Terminal

Mulmomab County

Interim Permit Limits Per MAO June 8, 2007

OR-000077-9 PERMIT NUMBER

001 DISCHARGE NUMBER

Portland, Or. 97210-3663 to November 30, 2008

47430 / 101642

YONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM 07 10 01 TO 07 10 (20,21) (22,23) (27,25) (26-27) (28-20) (30-34)

☐Check here if No Discharge

NOTE: Read Instructions before completing this form

Munician County				(22-23) (24-		(8-29) (30-31)				_	
PARAMETER		(3 Card Only) QUA (46-53)	ANTITY OR LOADIN (54-61)	lG	(4 Card Only) QU (38-45)	ALITY OR CONCEI (46-63)	NTRATION (54-61)		NO. EX	FREQUENCY OF	SAMPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM.	UNITS	(62-63)	ANALYSIS (64-58)	(69-70)
	SAMPLE MEASUREMENT				ND	ND	ND			1/30	GRAB
Benzo(a)anthracene	PERMIT REQUIREMENT				0.0	22	13	ug/L			
Benzo(a)pyrene	SAMPLE MEASUREMENT				ND	ND	ND	ng/L		1/30	GRAB
penzo(a)bytene	PERMIT REQUIREMENT				0.0	26	39	ug) Li			
	SAMPLE MEASUREMENT				0.3	0.3	0.3			1/30	GRAB
Benzo(b)fluoranthene	PERMIT REQUIREMENT				0.0	15	27	ug/L			
Benzo(k)fluoranthene	SAMPLE MEASUREMENT	·	٠.		ND	ND	ND	ug/L		1/30	GRAB
Deu Zo(k) uno la una ente	PERMIT REQUIREMENT				9.0	16	26	-6			
	SAMPLE MEASUREMENT				ND	ND	ND			1/30	GRAB
Chrysene	PERMIT REQUIREMENT	·			0.0	20	27	ug/L			
Dil	SAMPLE MEASUREMENT				NĐ	ND	ND	ng/I		1/30	GRAB
Dibenzo(ah)anthracene	PERMIT REQUIREMENT				0.0	7	9	ng/L			
Tanana.	SAMPLE MEASUREMENT				ND	ND	ND	nw.T		1/30	GRAB
Benzene	PERMIT REQUIREMENT				0.0	N/A	250	ug/L			
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER ICERTS	UNDER PENALTY OF LAWTH	ATTAS DOCUMENT AND ALL A	TTACHYENTS NE	E PRENCED	<i>-</i>		TELEPHON	E	D#	JE
Leslie Hyde	THAT QUE BASED I PERSON SUBJATAT I NALLADI INCLUDI	CINDER PEMILTY OF LAWTHY TO DIRECTION OR BUPERMISSIN LIFE DE PRESONALE PROPERTY IN MAY YIGHIGY OF THE PERIL SO DIRECTLY RESPONSIBLE TO IS TO THE SEST OF MY KARE THAT THERE ARE SIGKY SO THE POSS SILL TY OF FINE COM LAND SINUS OF SITES on MANE SINUS OF SITES on MANE SINUS OF SITES on MINE SIGKY THE MEDIAN OF THE SITES THE MEDIAN OF THE SITES THE MEDIAN OF THE SITES THE SITES OF THE SITES OF THE SITES THE SITES OF THE SITES OF THE SITES THE SITES OF THE SITES OF THE SITES OF THE SITES THE SITES OF THE SITES OF THE SITES OF THE SITES OF THE SITES THE SITES OF	ILY GATHER AND EVALUATE FON OR HEASONS WITH MAY FOR GATHERING THE EXPO MOWIEDGE AND SELET RU HICAN PERFECTES FOR SUS EAND MPRISONMENT FOR FUR	THE EXPORMATION UAGE THE SYSTEM IRLIATION THE TO EXCELLEGE AND MATTING FALSE IN CHOOSING WOLATE	SUBMITTED AL OR THOSE FORMATION ONS. BEE 18	ATURE OF PRINCIPAL	EYECUTIVE	(503) 286-368	31	07	11 13
TYPED OR PRINTED				ey xizuza fres up t	OFi	FICER OR AUTHORIZI	ED AGENT	AREA NUMBI	ER	YEAR N	O DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following: Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

CC: M. Propold, City of Portland: T. Self, KI: S. Flynn, KI

PERMITTEE NAME/ADDRESS (Inc.) NAME			DISCH	LUTANT DISC: ARGE MON (2-18)	Form Ap OMB No Approva			рртоved. ю, 2040-0004 al expires 05-31-98					
ADDRESS Koppers Inc.		terim Permit Limi		000077-9		001			- 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
7540 Nw Saint Helens	Road Pe	r MAO June 8, 20	07 PERM	TNUMBER	DISCH	ARGE NUMBER		_					
Portland, Or. 97210-3	1663 to	o November 30, 20	08	МОМ	TORING PERIOD		Cheek been if ki	a Dinal					
FACILITY Northwest Terminal			YEAR			WIC DAT	□Check here if N		•				
LOCATION Multnomah County	4	7430 / 101642	FROM 07	10 0			NOTE: Read Insti	nuction	s before	comple	eting fris	form	
			(20-21) ANTITY OR LOADIA	(22-23) (24-		28-29) (30-31) JALITY OR CONCE	NTRATION				TERUENI	~l	
PARAMETER .		(3 Card Only) QU/ (48-63)	(54-61)		(58-45)	(46-63)	(54-61)	_		NC.	REQUEN	37	MPLE YPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	U	NITS	(52-63)	ANALYS!( (64-68)	<b>,</b>	9-70)
	SAMPLE MEASUREMENT	r			ND	ND	ND	1			1/30	G	RAB
BTEX	PERMIT REQUIREMENT	-	·	·	0.0	N/A	1,000	7	ag/L				,
	SAMPLE MEASUREMENT	г			3.0	3.0	3.0				1/30	G	RAB
TURBIDITY	PERMIT REQUIREMENT				0.0		10	٦ '	ng/L				
Silver	SAMPLE MEASUREMENT	r			ŇD	ND	ND		~ ~ 7		1/30	G	RAB
Silver	PEF.MIT REQUIREMENT				0.0			_ ] '	ng/L				
Pentavalent Arsenic	SAMPLE MEASUREMENT				ND	ND	ND	╛.	ng/L		1/30	G	RAB
Tentavalent Arsent	PERMIT REQUIREMENT				0.0								
Cadmium	SAMPLE MEASUREMENT	r 1			ND	ND	ND	╛.	ng/L		1/30	G	RAB
Саплинь .	PERMIT REQUIREMENT				0.0				ngr				
Copper	SAMPLE MEASUREMENT	ſ			NÐ	ND	ND .	╛.	ng/L		1/30	G	RAB
Соррег	PERMIT REQUIREMENT				0.0								
Mercury	SAMPLE MEASUREMENT				ND	ND	NÐ		ng/L		1/30	G	RAB
Interest y	PERMIT REQUIREMENT			_	0.0			] '	ng r				
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER LEET	FY UNSER PEWAITY OF LEW THE	AT THIS SCOUMENT AND ALL A	TACHVENTS VIEW	E PREPARED	Andrea		TE	LEPHON	JΕ		DATE	
Leslie Hyde	THAT C PASED PERSU SUBMI IANA	FY INDEED PERSON OF LEW THM ANY DIRECTION OR SUPERWSD VALIFED PERSONNEL PROFER I ON MY NOURY OF THE PERSONS INS DIRECTLY RESPONSIBLE INTED IS TO THE REST VALETHAT THESE ARE SOME VARETHAT THESE ARE SOME	CY 3A HERAND EMPLIATE T ICN OR PERSONS WHO MAN FOR SATHERING THE INFO WOMLEDER AND SELLS. THE FOAT PENALTES FOR BUSINESS	HEINPORMATION AGE THE SYSTEM SMATION, THE IN ACCURATE AND HITTING FALSE IN	ISUBNITIED.  A. DR THOSE EOWATION OCCUPIETE ESTIMATION	Plu	Engli	(503) - I	286-36	81	07	13	13
<u></u>	LSC.	\$ 1001 AND 33 U.S.C. \$ 1319. (Pe	enalies under these stables my		Sign Sign	ATURE OF PRINCIPA	L EXECUTIVE	AREA CCCE	NUME	)ED	YEAR	MO	D07
TYPED OR PRINTED	or mexic	inum incrisonment of between 5 m	EINE IN SEES.		۲۵۰ ا	TIVER UKAU! HUKE	LEUAUENI	rrre	NUME	551	TERK	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)finoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ab)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

NAME	AME/ADDRESS (Inclu	de Facility Name:Loca	tion if Ditterent)	NATIONAL PCI DISCH	LLUTANT DISCH IARGE MON (2-15)		Form Approved. OMB No. 2040-0004 Approval expires 05-31-98						
ADDRESS Kol	ppers Inc. O Nw Saint Helens		erim Permit Limi r MAO June 8, 20	555-4	000077-9 IT NUMBER	DISCH	001 ARGE NUMBER			Appi O42	CAPITES	VU-U 1-	•
Eron III	tland, Or. 97210-3 rthwest Terminal		November 30, 20	08 YEAR PROM 07			MO LAG	Check here if No	•	•	- 45 41 - I-		
Mu	Itnomah County	47.	430 / 101642	(20-21)	(22-23) (24-	25) (26-27) (2	28-29} (30-31)	NOTE: Read Instru	Cuchs Defore	icmeo e	amy this	::cmi	
	AMETER 32-37)		(3 Card Cniy) QU/ (46-53)	ANTITY OR LOADIN (54-61)	IG	(4 Card Only) QL (38-45)	JALITY OR CONCE (46-53)	NTRATION (54-61)		NO.	FREQUENC CF ANALYSIS	32.5	MPLE YPE
			AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MUMIXAM	UNITS	(62-63)	(64-68)		9-70)
	Lead	SAMPLE MEASUREMENT				ND	ND	ND	l mg/L		1/30	G	RAB
	Leau	PERMIT REQUIREMENT				0.0			mg/L				
	Tin	SAMPLE MEASUREMENT	-			ND	ND	ND	mg/L		1/39	G	RAB
	3 III	PERMIT REQUIREMENT				0.0			] mg/L			T	
6	1 1 1	SAMPLE MEASUREMENT			,	ND	ND	ND			1/30	GI	RAB
	lenium	PERMIT REQUIREMENT				0.0			mg/L				
	Zine	SAMPLE MEASUREMENT				ND	ND	ND	mg/L		1/30	G	RAB
	Z.MC	PERMIT REQUIREMENT		·		0.0							
	•	SAMPLE MEASUREMENT											
		PERMIT REQUIREMENT											
"		SAMPLE MEASUREMENT			}								
		PERMIT REQUIREMENT									:		
		SAMPLE MEASUREMENT					i						
		PERMIT REQUIREMENT										1	
NAME/TITLE PR	RINCIPAL EXECUTIVE	OFFICER ICENT	FY UNDER FENALTY OF LANTS MY C'RELT ON OR SUPERVISI	ATTHE SCOUVENTANDALLA CNINACCOREANES WITHAS	TACHVESTS WER STEW DESIGNED	E PREPARED TO ASSURE	A -i		TELEPHON	νE		DATE	
	Leslie Hyde	THAT I BASES FERSI SUBM I AMA	EN UNDER FEMILTY OF LAYING ANY DEPENDENCE OF RESTANCE RESPENDENCE PROPERLY OF THE PERLY OF THE PERLY OF THE PERLY OF THE SET OF MY MAKE THAT THERE ARE SOME THAT THERE ARE SOME THAT THERE ARE SOME OF FING \$100 MY SOURCE \$100 MY SOUR	RET SATHER AND EVALUATE T BEON OR PERSONS WHO WAN FOR GATHERING THE INFO NOWLEDGE AND BELSE, TRUI FORMIT FEMALTES FOR SUR 2401 INSPENDING HOT FOR P	MEINFORMATION MAGE THE SYSTEM REMOTION, THE IN ELACCURATE, AND MITTENS FALSE MITTENS F	SLAW THE LOW THOSE FORWATION COMPLETE FORWATION	Mur	The state of the s	503) 286-36 	81	07	11	13
	DED OD DDINITED	U.S.C.	4 1:01 AND 35U 3 C. § 1313. IP	and les under these statutes my	sy'r clude tress up t	\$1000 mg	ATURE OF PRINCIPAL	LEXECUTIVE -	REA NUMBER		1/510	110	2434

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachmen's here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ab)authracene, PAHs'-total, Benzene, BTEX and Cyanide.

#### **MONTHLY NPDES - DMR - WORK SHEET**

Month & Year:

October, 2007

MONTHLY FLOW DATA

Number of days

during the month of actual discharge

Average "slug" discharge per day

220,000

Gallons per pumping/all 6

tanks)

# of pump. 5

# of Days/Emer. Pump. 0

Emer. Gals. 0

Total Gals. 1,100,000

#DIV/0!

Days of the month:

SAMP	LE	TEST RESULTS

											# of	# of LIMITS			80% of	ACTUAL					
	1	2	3	4	5	6	7	8	9	10	11	12	\$алр'яs	min.	avg.	max.	Max.	min.	avg.	, max.	unit
Temperature	21.1	15.5	15.2	14.9	12.5	12.2	12.4	13.1				-	8	n/a	n/a	nia	n/a	12.2	14.6	21.1	C
PH	7.2	7.4	7.5	7.4	7.5	7.4	7.6	7.8					8	6.0		9.0	n/a	7.2	7.5	7.8	SU
Oil & Grease	4.2				6.7								2	0	10	15	12	0.0	5.5	0.0	mg/L
Turbidity.	3.0												1	0		10		3	3	3	
Benzo(a)anthracene	ND												1	!	13	22		ND	ND	ND	ugl
Benzo(a)pyrene	ND												1		26	39		ND	ND	ND	ugl
Benzo(b)fluoranthene	0.3			$\Box$									1		15	27		0.3	0.3	0.3	ugl
Benzo(k)fluoranthene	ND				Ĭ.								1		16	26		ND	ND	ND	ugi
Chrysene	ND												1		20	27		ND	ND	ND	ugi
Dibenzo(ah)anthracene	ND												1		7	9		ND	ND	ND	ugl
Benzene	ND												1		n/a	250		ND	ND	ND	ugl
BTEX	ND												1		n/a	1000		ND	ND	ND	ugl
Cyanide	8.0												1	0	n/a	8.5		В	8	8	ug)
Phenois	ND									-			1	0.0	0.5	0.7	0.56	0.00	0.00	0.00	mg/L

#### QUARTERLY PAH SAMPLING

Date sample taken:

10/2/2007

Test Results:

1.0

ug/L

(Must be less than ) 400 ugl



Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

October 4, 2007

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

**Discharge Monitoring Report** 

Dear Mr. Zais,

Attached please find subject report for the month of September 2007.

There were no discharges during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: <a href="mailto:turnertj@koppers.com">turnertj@koppers.com</a>

Sincerely,

T. J. Turner

Plant Superintendent

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

: KOPPERS	
FROM	

ERMITTEE NAME/ADDRESS (Include Fealthy NameoLocation Pointerent)  AME  DDRESS  Koppers Inc.  Finterim Permit Limits  7540 Nw Saint Helens Road  Per MAO June 8, 2007			ts OR-	NATIONAL POLLUTANT DISCHARGE ELMINATION SYSTEM (NPOES) DISCHARGE MONITORING REPORT (DMR) (2-16) (17-19)  OR-000077-9 001 PERMIT NUMBER DISCHARGE NUMBER					Form Approved. OMB No. 2040-0004 Approval expires 05-31-98				
Portland, Or. 97216- CILITY Northwest Terminal CATION Multnomah County		November 30, 20 430 / 101642	YEAR 97		то 07	INO DAI	Check here if No NOTE: Read Insti		e compl	leting this	; form		
PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)				NTRATION (54-61)			FREQUENC OF	37	SAMPLE		
		AVERAGE	MAXIMUM	UNITS	MUMINUM	AVERAGE	MUMIXAM	UNITS	EX (62-63)	ANALYSIS	<b>3</b>	9-70	
FLOW	SAMPLE MEASUREMENT			GPP.					0	N/A	C	AL	
SEE COVER LETTER	PERMIT REQUIREMENT			GPD							L		
TEMPERATURE	SAMPLE MEASUREMENT							. C		1/7	G:	RA	
	PERMIT REQUIREMENT				N/A	N/A	<25deg C.						
РН	SAMPLE MEASUREMENT							su		1/7	G	RA	
	PERMIT REQUIREMENT				6.5	N/A	8.5						
OIL & GREASE	SAMPLE MEASUREMENT							mg/L		1/7	G	RA	
	PERMIT REQUIREMENT				0.0	10	15						
PHENOLS	SAMPLE MEASUREMENT							mg/L		1/30	G	RAI	
	PERMIT REQUIREMENT				0.0	0.5	0.7						
CYANIDE	SAMPLE MEASUREMENT									1/30	G	RAI	
	PERMIT REQUIREMENT				0.0	N/A	8.5	ug/L					
POLY AROMATIC HYDROCARBONS	SAMPLE MEASUREMENT			_						Qtr	G	RAE	
	PERMIT REQUIREMENT				0.6	N/A	400	ug/L					
NAME/TITLE PRINCIPAL EXECUTIV	/E OFFICER (CERTIFY UNDER I	UNDER PENALTY OF LAWTH	TTHIS DOCUMENTAND ALLAS IN INACCORDANCE WITH A B	TACHIVENTS WER	E PREPARED TO ASSURE			TELEPHO	NE		DATE	_	
Leslie Hyde		NET THE PENDONNEL HIS THE NET INDICATE OF THE PERE S DIRECTLY RESPONSIBLE ED IS, TO THE BEST OF MY KI NRE THAT THERE ARE SIGNS	IT THIS DOCUMENT AND ALL AT MINIMACCORDINACE WITH A 8 MINIMACCORDINACE WITH A 8 MINIMACCORDINACE MAY BE ARRESTED AND A STATE OF A ST	RE NECESSATION  RECTHE SYSTEM  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE AND  RECTHATE  REC	SUBMITTED.  NORTHOUSE FORMATION COMPLETE FORMATION	Me -		<del>(503)</del> 286-3	681	07	10	4	
TYPED OR PRINTED	U.S.C. § 1 oz matom	ro ine PUSSIBILIT OF PRE 601 AND 33 U.S.C. § 1319. (P or incrisorment of between 6 o	engles fuge; gless stantes us: engles fuge; gless stantes us:	inchiqui guae na p arvivia Alcinyii	STO,000 and	IATURE OF PRINCIPA FICER OR AUTHORI	LEXECUTIVE ZED AGENT	AREA NUM	BER	YEAR	MO	DA	

PERMITTEE NAME/ADDRESS (II NAME ADDRESS Koppers Inc. 7540 Nw Saint Hele	DISCH its OR	NATIONAL POXILITANT DISCHARGE ELIMINATION SYSTEM (NPDES) OISCHARGE MONITORING REPORT (DMR) (2-16) (17-19) OR-000677-9 PERMIT NUMBER DISCHARGE NUMBER					Form Approved. OMB No. 2040-0004 Approval expires 05-31-98						
FACILITY Northwest Termina Multnomab County	ı	to	November 30, 20	08 YEAR FROM 07		то 07	MO DAY 09 30 (28-29) (30-31)	Check here if N NOTE: Read Inst			leting this	form	
PARAMETER (32-37)			(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)				QUALITY OR CONC (46-53)	CENTRATION (54-61)		NO.	FREQUENCY OF	CY S	SAMPLE TYPE
		<u> </u>	AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(82-83	ANALYSIS (64-68)	3 I	9-70)
Banna (a) 4I	SAM MEASUR	PLE EMENT									Qtrly	·   G	RAB
Benzo(a)anthracene	PER REQUIR				1	0.0	22	13	ug/I	·			
Benzo(a)pyrene	SAMI MEASUR										Qtrly	G	RAB
	PERI REQUIR				1	0.0	26	39	ug/I	<b>'</b>		T	
Benzo(b)fluoranthene	SAM! MEASUR										Qtriy	G	RAB
	PERI REQUIR					0.0	15	27	ug/I	, <u> </u>			
Benzo(k)fluoranthene	SAM! MEASUR	ALE EMBNT							ug/I		Qtrly	, 6	RAB
	PER! REQUIRE			-		0.0	16	26	ug/1				
Chrysene	SAMF MEASUR										Qtrly	G	RAB
	PERI REQUIRE					0.0	20	27	ug/I	<u> </u>			
Dibenzo(ab)authracene	SAMF MEASURI	LE MENT									Qtrly	G	RAB
	PERIA REQUIRE	MENT				0.0	7	9	ng/I	<u>.</u>			
Benzene	SAMP MEASURE										Qtriy	, G	RAB
	PERA REQUIRE					0.0	N/A	250	ag/l	_		T	
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER	I CERTIFY UNDFR M	UNDER PENALTY OF LAW THA	THIS DOCUMENTANDALLA	TACHMENTS WES	EPREPARED	<u>.</u>	, [	TELEP	HONE		DATE	
Leslie Hyde		THAY GUA BASED OF PERSONS SUBMITTE FAMANIA	UNDER PENALTY OF LAW THAT  Y DIRECTION OR SUPERVISED  JEFED PERSONNEL PROPING  Y MY INQUIRYY OF THE PERSO  DIRECTLY PERSONNISILE!  DIS, TO THE EEST OF MY YOU  GO THE POSSIBILITY OF PINES  GO THE POSSIBILITY OF PINES  DI AND 33 US. § 1919. PP  INTOTONNET OF DIRECTLY  IN THE POSSIBILITY OF PINES  DI AND 35 US. § 1919. PP  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET OF DIRECTLY  INTOTONNET  INTOTONE	LY GATHER AND EMALITATE ON OR PERSONS WHO MAN OR GATHERING THE INFO OMEDIGE AND FELLER, TRU CANT PENALTIES FOR SILE	THE INFORMATION MOE THE SYSTEM RMATION, THE P E. ACCUPATE, ANI MITTING FALSE N	SUBMITTED. A OR THOSE PORMATION COMPLETE FORMATION	1/1/1/	unaz	(503) 286	-3681	07	10	4
TYPED OR PRINTED		U.S.C. § 10 or medicus	G THE POSSIBILITY OF FINE 201 AND 33 U.S.C. § 1319. (Per a imprisorment of between 6 m	AND INTRISCHMENT FOR K radius under these statutes m with and 5 years.	ANDWING VIOLATE By Include fines up I	ONE. SEE 18 0 \$10,000 and SI	GNATURE OF PRINCI	PAL EXECUTIVE RIZED AGENT	AREA N	UMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a) anthracene, Benzo(a) pyrene, Benzo(b) finoranthene, Benzo(k) finoranthene, Chrysene, Dibenzo(ab)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

LANGE TO SERVICE	NAME/ADDRESS (Inc Koppers Inc.			DISCH	IARGE MON (2-16)	HARGE ELIMENATION SY.	(DMR) (17-19)		C	MB No	proved. 5. 2940-00 d expires (		j
	Koppers Inc. 7540 Nw Saint Helen		erim Permit Limi MAO June 8, 20		-000077-9 IT NUMBER	DISCH	001 PARGE NUMBER						
	Portland, Or. 97210-		November 30, 20	·									
FACILITY ,	Northwest Terminal	J00J [j	November 30, 20	YEAR	MO DA	TORING PERIOD Y  Y  Y  Y  Y  Y  Y  Y  Y  Y  Y  Y  Y	MO ( DAY	Chack here if N	o Discharge				
	Multnomah County	47.	430 / 101642	FROM 07	09 1	TO 87	09 30	NOTE: Read Inst	ructions before	compl	eting this l	orm	
		7/			(22-23) (24-		28-29) (30-31)			· ,			
F	PARAMETER (32-37)		(3 Card Only) QU/ (46-53)	ANTITY OR LOADIN (54-61)	NG	(4 Card Only) QL (38-45)	JALITY OR CON( (46-63)	CENTRATION _(54-61)		NO.	FREQUENC OF	2 SERVED	
	(05-01)		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MUMIXAM	UNITS	(E2-63)	ANALYSIS (64-68)	(69-7	
		SAMPLE MEASUREMENT								·	Qtrly	GR	AB
	BTEX	PERMIT REQUIREMENT				0.0	N/A	1,000	ag/L			1	
T	URBIDITY	SAMPLE MEASUREMENT									1/30	GR	A.B
10	OKBIDII I	PERMIT REQUIREMENT			]	0.0			mg/L				
	Silver	SAMPLE MEASUREMENT	·								1/30	GR	<b>AB</b>
		PERMIT REQUIREMENT				0.8			mg/L				
Penta	valeni Arsenic	SAMPLE MEASUREMENT							mg/L		1/30	GR.	AB
		PERMIT REQUIREMENT				0.0							
	Cadmium	SAMPLE MEASUREMENT							⊣ mg/L		1/30	GR	A.B
		PERMIT REQUIREMENT				0.0				_		<u> </u>	
ļ	Copper	SAMPLE MEASUREMENT							mg/L		1/30	GR	AB
		PERMIT REQUIREMENT				0.0						<u> </u>	
ļ ,	Mercury	SAMPLE MEASUREMENT							mg/L		1/30	GR	AB
	·	PERMIT REQUIREMENT	·			0.0	<u> </u>						
NAMEDITIE	PRINCIPAL EXECUTIVE	OFFICER ICEMPY	UNDER PENALTY OF LAW THAT Y DIRECTION OR SUPERVISION	TTHIS DOCLARENT AND ALLA IN IN ACCORDANCE WITH AS	TACHVENTS WER	E PREPARED TO ASSURE	_		TELEPHO	NE	<del> </del>	DATE	
	Leslic Hyde	BASED DI PERSONS SUBMITTE LAMAWA	N MY MOUNTY OF THE PERS DIRECTLY RESPONSIBLE I DIS TO THE BEST OF MYKN RE THAT THERE ARE SIGNED THE THE THERE ARE SIGNED	ON OR PERSONS WHO MAN POR GATHERING THE INFO IOMLEDIGE AND BELLET, TRU ICAMT PENALTIES FOR SUB-	MAGE THE SYSTEM RMATTON, THE IN E. ACCURATE, AND MITTING FALSE IN	L DR THOSE PORMATION COMPLETE.		ennen	(503) 286-3	681	07	10	4
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	ND EXPLANATION OF A	NY VIOLATIONS	(Reference all attack	ments here)					and the second				

Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)finoranthene, Benzo(k)finoranthene, Chrysene, Dibenzo(ab)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

to N	rim Permit Limit MAO June 8, 201 November 30, 201 30 / 101642 (3 Card Only) (48-53) AVERAGE	07 PERM 08 YEAR FROM 07	MO DA 09 1 (22-23) (24-2	TORING PERIOD Y YEAR TO 07 25) (26-27) (	MU DAT	Check here if No NOTE: Read Instr NTRATION (54-61) MAXIMUM	-	NO. EX (62-63)	eting this for FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
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U.S.C. § 100 or maximum	01 AND S3 U.S.C. § 1318. (Par implication between 8 mc	nation under Peter statutes and ration and 5 years.)	ny include finas up k	SIG	MATURE OF PRINCIPA FFICER OR AUTHORIJ	L EXECUTIVE -	AREA NUM	BER	YEAR	MO DAY
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Oct. 04 2	Gallons per pumping(all 6 tanks)		# of p	ump.		# of Da	ays/Em	er. Pur	np.	Emer.	Gals.		Total (	Gals.	durin	mber o ig the n ual disc	nonth of			rage "si arge pe		
	220,000						(	C		ı	0	•	1	0						#D!V/0!		
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FAX NO.	PH				<del> </del>						<u> </u>				6.0	1	9.0	n/a		#####		SU
Ŧ	Oil & Grease														0	10	15	12	0.0	#####	0.0	mg/L
	Phenois			-	-	-		<u> </u>	_					}	0.0	0.5	0.7	0.56	0.00	######	0.00	mg/L

### QUARTERLY PAH SAMPLING

Date sample taken:

ug/L

Test Results: (Must be less than 1000 ug/L)

P2 Tile

KOPPERS

Koppers Inc.

Carbon Materials and Chemicals

7540 NW Saint Helens Road Portland, OR 97210-3663 Tel 503 286 3681 Fax 503 285 2831 www.koppers.com

September 5, 2007

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of August 2007.

There were no discharges during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: <a href="mailto:turnertj@koppers.com">turnertj@koppers.com</a>

Sincerely,

Plant Superintendent

Furner

M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

Form Approved. OMB No. 2040-C004 Approval expires 05-31-98

7540 Nw Saint Helen Portland, Or. 97210-		MAO June 8, 20 November 30, 20	·	IT NUMBER		ARGE NUMBER						
FACILITY LOCATION Multnomah County		30 / 101642	FROM 07	MO DA	1 TO 07	MO DAI	Check here if No NOTE: Read Instru	=	compl	eting this f	oam	
PARAMETER (32-37)		(3 Card Only) QU. (46-53)	ANTITY OR LOADIN (54-61)			ALITY OR CONCE (46-53)	NTRATION (54-61)		NO.	FREQUENCY OF	1 3.4.34	HIJ.
(04-01)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(E2-E3)	ANALYSIS (64-68)		-70)
FLOW	SAMPLE MEASUREMENT			CDD		_			0	N/A	Ca	TC
SEE COVER LETTER	PERMIT REQUIREMENT			GPD								
TEMPERATURE	SAMPLE MEASUREMENT							°C		1/7	GF	RAB
TE.TI ERLICAL	PERMIT REQUIREMENT				N/A	N/A	<25deg C.					
РН	SAMPLE MEASUREMENT							SU		1/7	GF	RAB
FN.	PERMIT REQUIREMENT				6.5	N/A	8.5	30				
Oil & GREASE	SAMPLE MEASUREMENT							mg/L		1/7	GI	RAB
OIL & GREASE	PERMIT REQUIREMENT				0.0	10	15					
PHENOLS	SAMPLE MEASUREMENT									1/30	GI	RAB
PHENOLS	PERMIT REQUIREMENT				0.0	0.5	0.7	mg/L				
CYANIDE	SAMPLE MEASUREMENT									1/30	GI	RAB
CIANIDE	PERMIT REQUIREMENT				0.0	N/A	8.5	ug/L				
POLY AROMATIC	SAMPLE MEASUREMENT							ner/T		Qtr	G	RAB
HYDROCARBONS	PERMIT REQUIREMENT				0.0	N/A	400	ug/L				
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER ICERT	CUNDER PEWALTY OF JAN THE MY DIRECTION OR SUPERVISO ALLFIED PERSONNEL PROPE IN MY INQUIRY OF THE PERS	ATTHIS DOCUVENTANDALLAT ON IN ACCORDANCE WITH A S	TACHIETS WE	E PREPARED D TO ASSURE			TELEPHO	NE		DATE	
Leslie Hyde	PERSON	S DIRECTLY RESPONSIBLE	FCR GATHERING THE XFO	RYATON THE I	POLITATION [	Mur		503) 286-36	681	07	09	04
TYPED OR PRINTED	INCLUCIA USC. 51 DEPERTE	PRE THAT THERE ARE SOME AS THE FOSSIBILITY OF FINE LUI AND 33 U.S.C. § 13/3. P Interpretable of catages So	AND MPRISONVENT FOR K end Sas Linger Thate alabase me marks and 5 years.)	NCWNG YELATI NCWNG A'ES OF	0\S. 323 13 b 310,000 and SIGM OF	ATURE OF PRINCIPA FICER OR AUTHORI	LEXECUTIVE A	AEA NUM	PER	YEAR	MO	DAY
COMMENTS AND EXPLANATION OF Per MAO of June 8, 2007. The in	ANY VIOLATIONS	(Reference all attac	hments here) he following: Ber	rzo(a)anth	racene. Benzo(a)	pyrene, Benzo(	b)fluoranthene. l	Benzo(k)fli	uoran	thene. C	hryse	ne.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (D.Y.R.)
(2-18) (37-19)

OR-000077-9

001

Dibenzo(ab)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

Koppers002910

PERMITTEE NAME/ADDRESS (Include Facility Name/Location & Clifferent) NAME

Interim Permit Limits

ADDRESS Koppers Inc.

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PERMITTEE NAME/ADDRESS	fraluce Facility Name/Location 7 Different
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ADDRESS Koppers Inc.

7540 Nw Saint Helens Road

Portland, Or. 97210-3663 to November 30, 2008

Interim Permit Limits Per MAO June 8, 2007 NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NFDES; DISCHARGE MONITORING REPORT (DMR) (2-18) (7-19) OR-000077-9 PERMIT NUMBER

001 DISCHARGE NUMBER Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

FACILITY LOCATION Northwest Terminal Multnomah County

47430 / 101642

MONITORING PERIOD YEAR MO DAY YEAR MO DAY 07 08 01 07 08 31 (20,24) (22,23) (24,25)

Check here if No Discharge

NOTE: Read Instructions before completing this form

			(20-21)	(22-23) (24-	·25) (26-27) (2	28-29) (30-31)				_	
PARAMETER (32-37)		(3 Card Only) QUI (46-53)	ANTITY OR LOAD! (54-61)			JALITY CR CONCEI (46-53)	NTRATION (54-61)		1 120	RECUENCY OF	SAMPLE TYPE
(32-31)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	טאודs	(62-63)	ANALYSIS (64-68)	(69-70)
	SAMPLE MEASUREMENT							_		Qtrly	GRA
Benzo(a)anthracene	PERMIT REQUIREMENT			1	0.0	22	13	ng/L			
	SAMPLE MEASUREMENT									Qtrly	GRA
Benzo(a)pyrene	PERMIT REQUIREMENT			1	0.0	26	39	ng/L			
Para (h) Garaga dhana	SAMPLE MEASUREMENT									Qtrly	GRA
Benzo(b)fluoranthene	PERMIT REQUIREMENT				0.0	15	27	ug/L			
Benzo(k)fluoranthene	SAMPLE MEASUREMENT							ug/L		Qtrly	GRA
Denzo(K)(tuoradmene	PERMIT REQUIREMENT				0.0	16	26				
Character	SAMPLE MEASUREMENT									Qtrly	GRA
Chrysene	PERMIT REQUIREMENT				0.0	20	27	ug/L			
Dibenzo(ab)anthracene	SAMPLE MEASUREMENT							Toget		Qtrly	GRA
Dineirzo(gn)aututatene	PERMIT REQUIREMENT				0.0	7	9	ug/L			
	SAMPLE MEASUREMENT							0		Qtrly	GRA
Benzene	PERMIT REQUIREMENT				0.0	N/A	250	ng/L			
IAME/TITLE PRINCIPAL EXECUTIVE	OFFICER	UNDER POWLTY OF LAWY THE	AT THIS COOL MENT AND ALL	TT-CE-VEVIS IVE	PENE	<del></del>	<u> </u>	TELEPHON	NE		ATE
Leslie Hyde	THAT GUA BAGED CI PERSONS STAMATE LAMATE	CIFIED PERSON'S PROPER N MY INCURY OF THE PERS S DIRECTLY RESPONSIBLE ED S, TO THE BEST OF MY (I PRE THAT THERE ARE SIGNI	MY SATHER AND EMILIATE ICH DR PERSONS WHO WAS FOR GATHER OF THE INFO MOMILECE AND REVIEW, TRI FOANT PENALTIES FOR SUI	THE NECRULATION MAGE THE SYSTEM PRIMATE AND MINISTRALE AND MINISTRALE AND MINISTRALE AND MINISTRALE AND MINISTRALE AND MINISTRALE	A CA THOSE IFCAMATICS OF COMPLETE IFCAMATION	10 /4	mess -	(503) 286-36	581	07	09
TYPED OR PRINTED				eh juay 49 yusa na j munajing Ajai Yu	GS10,000 and SIGN	ATURE OF PRINCIPAL FICER OR AUTHORIZ	EXECUTIVE ED AGENT	AREA NUME	BER	YEAR	NO D
Leslie Hyde  TYPED OR PRINTED  COMMENTS AND EXPLANATION OF		LENER POWLTY OF LAW THE WESTED YES ON THE SERVICE SERV		PANATON, THE IN PE ACCURATE ANY MITTING PALSE & CHEMING VIOLATI BY POLICE FREE UP I	DECAMATION OF CANADA CA	ATURE OF PRINCIPAL FICER OR AUTHORIZ	SYECUTIVE				_

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007. The inferim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dihenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

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PERMITTEE NAME/ADDRESS (Inc) NAME	KATIONAL PO DISCH	KATIONAL POLIUTANT DISCHARGE BLIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR) (2-13) (17-19)					Form Approved. OMB No. 2040-0004 Approval expires 05-31-98				
ADDRESS Koppers Inc. 7540 Nw Saint Helens		erim Permit Limi MAO June 8, 20		000077-9 IT NUMBER		001 ARGE NUMBER		C.	ργιοναι	одра ос	, , , , ,
Portland, Or. 97210-3 FACILITY Northwest Terminal LOCATION	3663 to	November 30, 20	YEAR	MO DA		VIU LUAT ] =	Check here if N	_	-1-	ar at.: =	
Multnomah County	47-	430 / 101642	FROM 07 (20-21)	08 01 (22-23) (24-2		08 31 N 8-29) (30-31)	IOTE: Read Inst	ructions detars	comple	mið sils it	.:!!!
PARAMETER		(3 Card Only) QU/ (48-53)	NTITY OR LOADIN	IG	(4 Card Only) QU. (38-45)	ALITY OR CONCEN (46-55)	ITRATION (54-61)		以 次	REQUENCY OF	SAUPLE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	ANALYSIS (64-68)	(69-70)
втех	SAMPLE MEASUREMENT							ug/L		Qtrly	GRAB
Dies.	PERMIT REQUIREMENT				0.0	N/A	1,000	44.5			
TURBIDITY	SAMPLE MEASUREMENT							mg/L		1/30	GRAB
101010171	PERMIT REQUIREMENT				0.0						
Silver	SAMPLE MEASUREMENT							mg/L		1/30	GRAB
Guvei	PERMIT REQUIREMENT				0.0 .			my b			
Pentavalent Arsenic	SAMPLE MEASUREMENT							mg/L		1/30	GRAB
1 valurateur in seure	PERMIT REQUIREMENT				0.0						
Cadminm	SAMPLE MEASUREMENT							mg/L		1/30	GRAB
Candinu	PERMIT REQUIREMENT				0.0			mg/L	<u> </u>		
Copper	SAMPLE MEASUREMENT							mg/L		1/30	GRAB
	FERMIT REQUIREMENT				0.0			mg L			
Mercury	SAMPLE MEASUREMENT							mg/L		1/30	GRAB
Wild Cusy	PERMIT REQUIREMENT				0.0						
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER CORNEY	LINDER FEMALTY OF LANY THA Y DIRECTION OR SUPERVISOR	THIS DOCUMENT AND ALL A IN MACCORDANCE WITH AS	TECHNENTS WER	E PRÉFARED TO ASSURE			TELEPHO	NE	1	DATE
Leslie Hyde	SASED O PERSONA SUSATTO LAMAGE	UNDER FEWALTY OF LAY THA Y SIREDITEN OR SUFFERING UFFED PERSONNEL PROFER N LY ACCURY OF THE PORS 5 CREETLY RESPONSIBLE I DUS TO THE RESPONSIBLE I SEE THAT THERE ARE SIGNEY OF THE POSSIBLITY OF FINE OCI AND 33 U.S.C. 5 THE PO MITOTROM BIND OF SIGNEY OF INTERPRETATION OF SIGNEY OF IN	CN CR PERSONS WHO MAN FOR SATHERING THE NEO CYLLEGGE ALD BELLER TRUI ICANT PENALTIES FOR SUB AND IMPRISONMENT FOR K	AGE THE BYSTEM RYATION, THE IN E. 40CURATE AND MITTING FALSE IN NOWING VIOLATIO	OR TROSS FORMATION COMPLETE COMMATION ANS. SEE '8	ATURE OF PRINCIPA	LESS.	(503) 286-3 	681	07	ß9 04
TYPED OR PRINTED	V.S.C. § 1 crinavas.	uur AND 33 U.S.C. § 1918. (Pe minprisonment of between 6 m	rumas under stess slatules mi ombs and 5 years.)	de service par la participa de la participa de la participa de la participa de la participa de la participa de	S13000 End OF	FICER OR AUTHORIZ	ED AGENT	AREA NUM	BER	YEAR	MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference ell attachments here)
Per MAO of June 3, 2007. The interim limits are referenced for the following; Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ab)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

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'ERMITTEE NAME/ADDRESS   IAME	(houde Facility Name/Location	on if Offerent)	DISCH	ARGE MON	HARGE ELIMINATION SY HTORING REPORT	8TEM (NPDES) ' (DMR) (17-19)		(	om Ap MB No	proved. . 2040-00 I expires (	104 15-31-98
ADDRESS Koppers Inc. 7540 Nw Saint Hel		rim Permit Limi MAO June 8, 20		000077-9 IT NUMBER	C/SCH	001 LARGE NUMBER		,	фріфуа	CAP.103	,0 01-00
Portland, Or. 9721	0-3663 to	November 30, 20	<u> </u>		TORING PERIOD		Check here if N	a Disabama			
ACILITY Northwest Termin	al		FROM 07	MO DA 08 0		MO DAY 08 31	-	_	1	ada da da la la la la la la la la la la la la la	Farm
Multnemah Count	ty 4743	30 / 101642		(22-23) (24-2		28-29) (30-31)	NOTE: Read Inst	rections balon	e Comhi	saufi rure	,Qta1
PARAMETER		(3 Card Only) QU (46-53)	ANTITY OR LOADIN		(4 Card Only) QL	JALITY OR CONCE	NTRATION (54-61)		NO.	FREQUENC	SAMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	(38-45) M!NIMUM	(46-53) AVERAGE	MAXIMUM	UNITS	(62-63)	CF ANALYSIS (64-68)	1Y?E (69-70)
	SAMPLE MEASUREMENT									1/30	GRAB
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Tie	SAMPLE MEASUREMENT							mg/L		1/30	GRAB
	PERMIT REQUIREMENT				0.0						
Selenium	SAMPLE MEASUREMENT									1/30	GRAB
Setential	PERMIT REQUIREMENT				0.0			mg/L			
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OMMENTS AND EXPLANATION								DODE NUN	IUEIX	1 CEAR	- 1 Sh

COMMEN'S AND EXPLANATION OF ANY VIOLATIONS (Reference all autocoments note)

Per MAO of June 8, 2007. The interim limits are referenced for the following; Benzo(a) authracene, Benzo(a) pyrene, Benzo(b) fluoranthene, Benzo(k) fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs'-total, Benzene, BTEX and Cyanide.

CC: M. Propold, City of Portland: T. Seif, KI: S. Flynn, KI (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

FAX NO. :5032852831



Koppers Inc.

Carbon Materials and Chemicals
7540 NW Saint Delens Read
Portland, OR 97210-3663
Tel 503-286-3681
Fax 503-285-2831
www.koppers.com

August 2, 2007

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Pennit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of July 2007.

There were no discharges during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: turncrti@koppers.com

Sincerely,

T. J. Furner

Plant Superintendent

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

PERMITTEE NAME/ADDRESS (Ira NAME		ARGE MON	Form Approved. OMB No. 2040-0004 Approvat expires 05-			004	_QR					
ADDRESS Koppers Inc. 7540 Nw Saint Helen		im Permit Limits VIAO June 8, 2001		-000077-9 IT NUMBER		(17-19) 001 ARGE NUMBER		ŕ	ψhioλε	့တယ္။ဇေ	90-01·	<b>J</b>
FACILITY Northwest Terminal Multnomah County		November 30, 2008	YEAR FROM 07		TO 07	MO DAT	Check here if No NOTE: Read Instru	-	omp!	eting this	i fom:	
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(02-01)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(52-83)	(64-68)		( <del>)</del> (70)
FLOW	SAMPLE MEASUREMENT			CDD					0	N/A	С	ALC
SEE COVER LETTER	PERMIT REQUIREMENT			GPD								
TEMPERATURE	SAMPLE MEASUREMENT							° C		1/7	G	RAE
IEMIFERATURE	PERMIT REQUIREMENT				N/A	N/A	<25deg C.					
РН	SAMPLE MEASUREMENT							sv		1/7	G	RAE
rn	PERMIT REQUIREMENT				6.5	N/A	8.5	30				
OIL & GREASE	SAMPLE MEASUREMENT							mg/L		1/7	G	RAB
OIL W OILLASE	PERMIT REQUIREMENT				0.0	10	15					
PHENOLS	SAMPLE MEASUREMENT									1/30	G	RAB
	PERMIT REQUIREMENT				0.0	0.5	0.7	mg/L				
CYANIDE	SAMPLE MEASUREMENT							ug/L		1/30	G	RAB
CIAMBE	PERMIT REQUIREMENT				0.0	N/A	8.5	ug/L				
POLY AROMATIC	SAMPLE MEASUREMENT					<u>.</u>		pa/l		Qtr	G	RAB
HYDROCARBONS	PERMIT REQUIREMENT				0.0	N/A	400	ag/L				
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	: KOPPERS
	FROM

PERMITTEE NAME/ADDRESS (655) NAME	uda Facility Nama/Locatio	n if Different)	DISCH	ARGE MONI	ARGE ELIMINATION SY TORING REPORT	STEM (NFDES) (DMR) (17-18)			Form Ap	proved. . 2040-01 expires	304 05-34	_QR
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Portland, Or. 97210-3 FACILITY Northwest Terminal	3663 to ?	November 30, 200	98 YEAR		ORING PERIOD	YAG CM	Check here if N	o Discharge				
LOCATION Northwest Terminal Multnomah County	474	30 / 101642	FROM 07	07 01 (22-23) (24-2	TO 07		NOTE: Read instr	ructions before	s comple	ting this	form	
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Benzo(a)anthracene	PERMIT REQUIREMENT				0.0	22	13	ug/L				
Benzo(a)pyrene	SAMPLE MEASUREMENT							ug/L		Qtrly	G	RAB
Бенгл(а)ругене	PERMIT REQUIREMENT				0.0	26	39	<b>V</b> <sub>6</sub>				
Benzo(b)fluoranthene	SAMPLE MEASUREMENT							ug/L		Qtrly	G	RAB
Deuzo(b)/Moraninene	PERMIT REQUIREMENT				0.0	15	27			· · · ·		
Benzo(k)fluoranthene	SAMPLE MEASUREMENT	·			· · · · · · · · · · · · · · · · · · ·			ng/L		Qtrly	G	RAB
	PERMIT REQUIREMENT		·		0.0	16	26					
Chrysene	SAMPLE MEASUREMENT							ng/L		Qtrly	G	RAB
	PERMIT REQUIREMENT				0.0	20	27	-6			$oldsymbol{\perp}$	
Dibenzo(ab)anthracene	SAMPLE MEASUREMENT							ug/L		Qtrly	G)	RAB
2.20.20(23,422.122.23	PERMIT REQUIREMENT				0.0	7	9	-6-				·
Benzene	SAMPLE MEASUREMENT		·					ug/L		Qtrly	GI	RAB
Бенган	PERMIT REQUIREMENT				0.0	N/A	250	Le. L				
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FROM

EPA Form 3320-1 (10-96)

PERMITTEE NAME/ADDRESS (FICE NAME  ADDRESS Koppers Inc. 7540 Nw Saint Helen	Ept	tion i Officerii) revim Permit Limi r MAO June 8, 20	DISCH its OR	XLUTANT DISCI LARGE MON (2-15) -000077-9 IIT NUMBER		STEM (NPDES)  (DMR) (17-19)  001  VARGE NUMBER		(	DMB No	proved. 5, 2040-0 1l expires		-98
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TURBIDITY	PERMIT REQUIREMENT				0.0			mg/L				
	SAMPLE MEASUREMENT									1/30	C	RAB
Silver	PERMIT REQUIREMENT				0.0			mg/L				
Pandaualant America	SAMPLE MEASUREMENT							mg/L		1/30	G	RAB
Pentavalent Arsenic	PERMIT REQUIREMENT				0.0			mg L				
	SAMPLE MEASUREMENT									1/30	G	RAB
Cadmium	PERMIT REQUIREMENT				0.0			mg/L				
	SAMPLE MEASUREMENT									1/30	G	RAB
Copper	PERMIT REQUIREMENT				0.0			mg/L				
	SAMPLE MEASUREMENT									1/30	G	RAB
Mercury	PERMIT REQUIREMENT		<del></del>	<del> </del>	<b>0</b> .0	<u> </u>		mg/L			†	
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FAX NO. :5032852831

Jul. 24 2007 10:20AM P1

### **FAX TRANSMITTAL**

KOPPERS INC.

7540 NW SAINT HELENS RD.

PORTLAND, OR 97210-3663

TELEPHONE:

503-286-3681

FAX:

503-285-2831

TO: Traci Self

**DATE: July 24, 07** 

CC: Greg Traczek; Bill Meisinger

FROM: TJ Turner

TOTAL # OF

PAGES: 3

SUBJECT: Letter from City of Portland



Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

October 3, 2005

Koppers Industries, Inc. Amos Kamerer 7540 NW St. Helen's Rd. Portland, OR 97210

Re: Stormwater discharge to City of Portland sewer system.

#### Dear Mr. Kamerer:

In response to your request for stormwater discharge to the City sewer system dated September 28, 2005; the city has discharge limits that will need to be met before discharge can be allowed. The following is the current local limitations in effect at this time.

Pollutant	Local	10/26/05 EAMPLE
Name	Limit Daily	Test
New Alexander	Max (mg/L)	Results
METALS Arsenic	2 - 0. <b>2</b> - 1.1	ND
Cadmium	0.7	ND
Chromium	5.0	$\wedge D$
Copper	3.7	1,0
	0.7	0.03
Mercury	0.010	0,000 11
Molybdenum	1.4	ND
Nickel	2.8	NO
Selenium	0.6	NO
Silver	0.4	ND
Zinc		0.39
NON-METALS IN ORGANICS		
Cyanide (% 8 %)	APPLICATION OF THE PROPERTY OF	No
pH	5.0-11.5 su	NO
Sulfide	4.0	M U

		(ORGANICS)

1,2-Dichloroethane	0.50	NO
2,4-Dinitrotoluene	0.13	NO
Acrylonitrile	1.00	NO
Chlordane	0.03	NID
Chlorobenzene	0.20	NO
Chloroform	0.20	ND
Nitrobenzene Pentachlorophenol	Bright Committee Committee Committee Committee Committee Committee Committee Committee Committee Committee Com	<b>№</b> 0 <b>∨</b> 0
Trichtoroethylene	0.20	VD
Non-polar Oil & Grease	110	<b>V</b> O

Sampling listed in your submittal indicated high readings for Selenium; 6.9 mg/l and for Zinc, 6.3 mg/l. Benzene at 29 mg/l would also be a concern. If you want to consider pretreating the discharge to local limitations you may apply for a permit at any time. I am also enclosing a copy of the City Code which includes the local limits for your review.

If you have comments or questions as you read through the materials, please do not hesitate to contact me at 823-7230.

Respectfully,

Ann O'Roke, Permit Manager Industrial Source Control Division

A 150 1 20 ho

Cc: Industry File

FAX NO. :5032852831

Jul. 05 2007 02:32PM P1



Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681

тег 503-286-3687 Гах 503-285-2831

www.koppers.com

July 5, 2007

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Avc. Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of June 2007.

There were no discharges during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at (503) 286-3681 or via e-mail at: turnertj@koppers.com

Sincerely,

Plant Superintendent

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

PERMITTEI NAME ADDRESS	E NAME/ADDRESS (Inc. Koppers Inc. 7540 Nw Saint Hele Portland, Or. 97210	ns Road	afon if Offeerif;	DISCH	HUTAKT DISCH HARGE MON 12-16: -000077-9 IT NUMBER		(DMR) 47	1642	0	MB No	proved. , 2040-0004 expires 05	4 -31-98
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	PARAMETER		(3 Card Only) QU (46-53)	ANTITY OR LOADII (54-61)			ALITY OR CONCE	NTRATION (54-61)		NO.	FREQUENCY OF	SAMPLE TYPE
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	FLOW	SAMPLE MEASUREMEN	T		GPD					0	N/A	CALC.
SEE	COVER LETTER	PERMIT REQUIREMEN	г						1			
		SAMPLE MEASUREMEN	т				·		0		1/7	GRAB
TE	MPERATURE	PERMIT REQUIREMENT	г			N/A	N/A	⊲5deg C.	C			
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Oi	L & GREASE	PERMIT REQUIREMENT	Г			0.0	10	15	ing.			
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	CYANTDE	PERMIT REQUIREMENT	г			0.0	0.0049	0.0085	mg/l			
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Per MAO of June 8, 2007, Please reference the interim limits for the following: Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs - total, Benzene BTEX and Cynide.

: KOPPERS FROM

Form Approved. OMB No. 2040-0004 PERMITTEE NAME/ADDRESS (Include Facility Name/Location / Office and NATIONAL SOLUTIANT DISCHARGE FLIMINATION SYSTEM (NEOES). 47430 DISCHARGE MONITORING REPORT (DMR) NAME Konners Inc. 101642 Approval expires 05-31-98 7540 Nw Saint Helens Road 001 OR-090077-9 ADDRESS DISCHARGE NUMBER PERMIT NUMBER Portland, Or. 97210-3663 MONITORING PERIOD Check here if No Discharge FACILITY YEAR MO DAY YEAR | MO | DAY Northwest Terminal LOCATION NOTE: Read Instructions before completing this form 06 01 07 06 FROM: 07 тο Г 30 Multnomah County (26-27) (28-29) (30-31) (20-21) (22-23) (24-25) FREQUENCY OF (3 Card Only) (46-53) QUANTITY OR LOADING QUALITY OR CONCENTRATION (4 Card Only) NG. SAMPLE PARAMETER (54-61) (54-61) (46-53) /38-45 FX. TYPE (32-37) ANALYSIS IIN!TS 62-E3 **AVERAGE** MINIMUM **AVERAGE** MAXIMUM (64-58) (69-70) MAXIMUM UNITS SAMPLE. GRAB Otrly MEASUREMENT mg/l Benzo(a)anthracene PERMIT 0.0 NA 0.032REQUIREMENT SAMPLE GRAB Otrly MEASUREMENT mg/l Benzo(2)pyrene. PERMIT 0.0 N/A 0.032REQUIREMENT SAMPLE GRAB Otrly MEASUREMENT Benzo(b)fluoranthene mg/l PERMIT 0.032 0.0 N/A REQUIREMENT SAMPLE. GRAB Otrly MEASUREMENT mg/l Benzo(k)fluoranthene. PERMIT 0.032 0.0 N/A REQUIREMENT SAMPLE GRAB Otrly MEASUREMENT തമി Chrysene. PERMIT 0.0 N/A 0.032 REQUIREMENT SAMPLE GRAB Otrly MEASUREMENT Dibenzo(ab)anthracene mg/l **PERMIT** 0.0N/A 0.032 REQUIREMENT SAMPLE **GRAB** Otrly MEASUREMENT mg/l Benzene PERMIT 0.0 N/A 25 REQUIREMENT ICETTY VIOLEN PRICE TO SELVEN THAT THE DOCUMENT AND ALL ATTICH VIOLEN IN SECRET TO ASSURE IN THE SECRET OF A SERVED IN A SECRET TO THE SECRET OF A SERVED IN A SECRET TO THE SECRET THE SECRET TO A SERVED IN A SECRET THE SECRET THE SECRET THE SECRET THAT CALLED THE SECRET THAT CALLED THE SECRET THAT CALLED THE SECRET THE SECRET THAT CALLED THE NAME/TITLE PRINCIPAL EXECUTIVE OFFICER TELEPHONE DATE (503) 286-3681 07 07 05 Turner Leslie Hyde

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Per MAO of June 8, 2007, Please reference the interim limits for the following: Benzo(a)anthracene, Benzo(a)pyrene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)anthracene, PAHs - total, Benzene, BTEX and Cynide.

IGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

YE4R

NUMBER

TYPED OR PRINTED

MO

DAY

PERMITTEE NAME/ADDRESS (IN NAME Koppers Inc.  ADDRESS 7540 Nw Saint Hel Portland, Or. 9721  FACILITY LOCATION Northwest Termina Multromah County	ens Road 0-3663	ban if Differeni)	NATIONAL POLILITANT DISCHARGE ELIMINATION SYSTEM (NPDES! DISCHARGE MONITORING REPORT (DMR) (17-19)   OR-000077-9   O01				47430 101642 Check here if N	•	Form Approved. OMB No. 2040-0004 Approval expires 05-31 Discharge oftions before completing this form			98
PARAMETER (32-37)		(3 Card Only) QU (46-53)					ENTRATION (54-61;		NO.	FREQUENC DF	( -:-	MPLE YPE
(02 07)		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYS)S (64-68)		9-70)
BTEX	SAMPLE MEASUREMENT									Qtrly	G	RAB
BIEX	PERMIT REQUIREMENT				0.0	N/A	250	mg/l				
TURBIDITY	SAMPLE MEASUREMENT									1/30	G	RAB
10.0310117	PERMIT REQUIREMENT				0.0			mg/l				
Silver	SAMPLE MEASUREMENT									1/30	G	RAB
Silver	PERMIT REQUIREMENT				0.0			mg/i				
Pentavalent Arsenic	SAMPLE MEASUREMENT					·				1/30	G	RAB
7 Chiavanti Aiscult	PERMIT REQUIREMENT				0.0			mg/l			T	,
Calcal	SAMPLE MEASUREMENT		l ,			1				1/30	G	RAB
Cadmium	PERMIT REQUIREMENT				0.0			mg/l				
Connec	SAMPLE MEASUREMENT		·							1/30	G	RAB
Copper	PERMIT REQUIREMENT				0.0			mg/l		<del>                                     </del>		
	SAMPLE MEASUREMENT									1/30	G	RAB
Mercury	PERMIT REQUIREMENT				0.0			— நூ			+	
NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER IDENTIFY U	NOES FENALTY OF LAW THAT	THE ECONOMINE ALLAT	TACHVEIRTS WEST	EPREPARED	1	Z T	TE EPI	HONE		DATE	
Leslie Hyde	THAT QUE.  BASED ON PERSONS SUBURIES JAMANUS	AND THE PERSONNEL PROPERSONNEL	IT HE DOCUMENT AND ALL AT MININACCEPANCE WITH A SI VE GETHER AND EXCLUSIVE DO. OR PERSONS WHO MAN OP, GATHERING THE MAN OWNED OF AND SOLIES TAND WALEDOS AND SOLIES TAND CAMP FERSON LEW FOR ALL PROSESSIONS THE STORY FOR ALL PROSESSIONS THE STORY FOR ALL MINING BY COLUMN THE STORY FO	TSTEM EESIGNED HE INFORMATION AGE THE SYSTELL CHARION, THE INI ACCURATE AND	TO ASSISTE SUBVITIED.  OF THE OSE FOR VATION COMPLETE  T. J	Torner	many.	(503) 286	3681	07	07	05
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COMMENTS AND EVELANATION OF	10/12/10/ 4770							UJD:		<u> </u>		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Per MAO of June 8, 2007, Please reference the interim limits for the following: Benzo(a)anthracene, Benzo(b)fluoranthene, Benzo(k)fluoranthene, Chrysene, Dibenzo(ah)authracene, PAHs - total, Benzene, BTEX and Cynide.

Koppers Inc.

7540 Nw Saint Helens Road

Portland, Or. 97210-3663

Northwest Terminal

Multnomah County

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16)
(17-19) 47430 101642 OR-000077-9 001

DISCHARGE NUMBER

06

(26-27) (28-29) (30-31)

30

Form Approved. OMB No. 2040-0084 Approval expires 05-31-98

Check here if No Discharge MO DAY

NOTE: Read Instructions before completing this form

PARAMETER		(3 Card Only) QU/ (46-53)	ANTITY OR LOADIN	(22-23) (24- IG		8-28) (30-31) ALITY OR CONCE! (46-53)	TRATION (54-61)		NO.	FREQUENCY OF	SAM	PLE PE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MUMIXAM	UNITS	(62-63)	ANALYSIS (64-68)	(69	
7	SAMPLE MEASUREMENT									1/30	GF	LAB
Lead	PERMIT REQUIREMENT				0.0			mg/l				
Tia	SAMPLE MEASUREMENT							mg/l		1/30	GF	RAB
f 3tt	PERMIT REQUIREMENT				0.0			1236,1				
Selenium	SAMPLE MEASUREMENT							man		1/30	GF	EAB
Selenium	PERM.T REQUIREMENT				0.0			mg/l	<u> </u>			
Zine	SAMPLE MEASUREMENT			·				mg/l		1/30	GI	RAB
	PERMIT REQUIREMENT				0.0							
	SAMPLE MEASUREMENT					·						
	PERMIT REQUIREMENT		·									
	SAMPLE MEASUREMENT											
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Leslie Hyde	THAT OLD SASSED OF PERSON SUBJECT LAMAN	MORR FRACTY OF LAW TAK IV DRSCTION OF SUPERVISOR ALPES PERSON (EL PROSON MAY INDURY OF THE PRESS PORCETY RESPONSIBLE F EDIS, TO THE SEETO MY MAY ALE THAT THERE ARE SISSUE ALE THAT THERE ARE SISSUE NOT MAY DE USE OF 1919. FA UNITARIES THERE ARE SISSUE TO THAT SISSUE OF 1919. FA UNITARIES THERE ARE SISSUED.	Y GATHER AND ENLIGHTED DWOA PERSONS WAS MAN OR GATHERING THE INPOI DWLEDGE AND BELIEF TRUE CANT FENALTIES FOR SUE	HE INFORMATION AGE THE SYSTEM RIVATION, THE IN ACCURATE AND ATTING FALSE IN	SIGNITION TO J.	furner		<del>(5</del> 03) 286-3	681	07	07	05
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PERMIT NUMBER

YEAR I MO I DAY

06

(20-21) (22-23) (24-25)

FROM 07

MONITORING PERIOD

TO

อา

YEAR

07

FAX NO. :5032852831



June 4, 2007

Oregon Department of Environmental Quality Northwest Region 2020 SW Fourth Ave. Suite 400 Portland, OR 97201-4987 Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681

Fax 503 285 2831 www.koppers.com

Attention:

Elliot J. Zais

Sr. Environmental Engineer

Reference:

NPDES Permit No. 101642

**Discharge Monitoring Report** 

Dear Mr. Zais,

Attached please find subject report for the month of May 07.

For the month, we had one regular discharge of our 220,000 gallon storage tanks, for a total discharge of 220,000 gallons. This discharge of 220,000 gallons was pumped on each of the following days in May: 24<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at 503-286-3681 or via e-mail at: turnertj@koppers.com

Sincerely,

LJ. Turner

Plant Superintendent

Cc: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

# **MONTHLY NPDES - DMR - WORK SHEET**

Month & Year:

May, 2007

### MONTHLY FLOW DATA

Gallons per pumping(all 6

Number of days

during the month of

Average "slug"

tanks)

# of pump.

# of Days/Emer. Pump.

Emer. Gals. Total Gals. actual discharge

discharge per day

220,000

1

0

0

220,000

#DIV/0!

Days of the month:

### SAMPLE TEST RESULTS

								#of	LIMITS			80% of	0% ofACTUAL		CTUAL						
	1	2	3	4_	5	6	7	8	9	10	11	12	Samples	min.	avg.	max.	Max.	min.	avg.	max.	unit
Temperature	15.5	16.4								]			2	n/a	n/a	n/a	n/a	15.5	15.95	16.4	C
														ř							
PH	7.6	7.4		<u> </u>	<u> </u>		<u> </u>						2	6.0		9.0	n/a	7.6	7.50	7.4	SU
						L				<u> </u>					i				<b>[</b>		•
Oil & Grease	ND				<u> </u>								1	0	10	15	12	0.0	ND	ND	mg/L
				<u> </u>	ļ	1	L	ļ		<u> </u>				i							
Phenois	0.074			l	l	Ì	l	1	l	l			1	0.0	0.5	0.7	0.56	0.000	0.074	0.074	mg/L

### **QUARTERLY PAH SAMPLING**

Date sample taken:

Test Results:

ug/L

( Must be less than 1000 ug/L)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NATIONAL POLLITANT DISCHARGE ELIMINATION SYSTEM (NPCES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19) Form Approved. OMB No. 2040-0004 47430 NAME Konners Inc. Approval expires 05-31-98 7540 Nw Saint Helens Road ADDRESS 001 OR-000077-9 101642 PERMIT NUMBER DISCHARGE NUMBER Portland, Or. 97210-3663 MONITORING PERIOD Check here if No Discharge **FACILITY** YEAR MO DAY YEAR MO DAY Northwest Terminal LOCATION FROM 07 05 07 05 NOTE: Read Instructions before completing this form <u>61</u> TO 31 Multaomah County (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) QUANTITY OR LOADING QUALITY OR CONCENTRATION REQUENC (3 Card Only) (4 Card Only) NO. SAMPLE PARAMETER OF (46.53) (38-45) (54-6t) (54-61) (46-53) FΧ TYPE (32-37) ANALYSIS (62-63) UNITS **AVERAGE** MINIMUM AVERAGE MAXIMUM (69-70) MAXIMUM UNITS (64-68) SAMPLE FLOW CALC N/A **GPD** MEASUREMENT PERMIT SEE COVER LETTER REQUIREMENT SAMPLE GRAB Λ 1/7 15.5 15.95 16.4 MEASUREMENT  $\mathbf{C}$ **TEMPERATURE** PERMIT N/A N/A N/A REQUIREMENT SAMPLE 1/7 GRAR 7.60 7.50 7.40 MEASUREMENT PH SU PERMIT 6.0 N/A 9.0 REQUIREMENT SAMPLE GRAB ND ND 1/7 0.0 MEASUREMENT തഉ/1 OIL & GREASE PERMIT 15 10 0.0 REQUIREMENT SAMPLE GRAB 0.00 0.074 0.0741/30 MEASUREMENT **PHENOLS** mg/t PERMIT 0.0 0.5 0.7 REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMIT

REQUIREMENT

CC: M. Pronold, City of Portland: T. Self, KI: S. Flynn, KI

ICERTIFY LADER PENALTY OF LAW TILLY THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT DUALIFIED PERSONNEL PROPERTY CATHER AND ENLINET THE MYPRIANT DIS JUSTITED HAS EDONE MY INDUSTY OF THE PERSONN OR PERSONS WHO MANAGE THE SYSTEM OR INDUSTRIBUTION FROM THOSE PERSONS DIRECTLY REPORTABLE FOR GATHERING THE OFFICE MYPRIANTION SUBMITTED S. TO THE BEST OF MY KNOWLEDGE AND SILLEY THE ACCURATE, AND COMPLETE HAM ANAME THAT THERE ARE SERVING THAT PENALTES FOR SUBMITTED FLAST PROPARATION, INCLIDING THE POSSIBILITY OF FAME AND MORE SOLMERY FOR MY KNOWLED COMPLETE. AND AND A STATE OF THE PROPAMATION, INCLIDING THE POSSIBILITY OF FAME AND MORE SOLMERY FOR MY KNOWLED WOULD NOT AN OWN TO STATE OF STATE OF THE POST PROPARATION, INCLIDING THE POSSIBILITY OF FAME AND MORE SOLMERY FOR MY WOULD NOT AND STATE OF STATE OF THE POST PROPAMATION. INCLIDING THE POSSIBILITY OF FAME AND MORE SOLMERY FOR MY WOUND WOULD NOT AND STATE OF STATE OF THE POST PROPAGATION OF TH

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Leslie Hyde

TYPED OR PRINTED

Koppers002929

97

YEAR

TELEPHONE

NUMBER

T503) 286-3681

AREA

Turner

NATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

DATE

06

MO

04

DAY



CERTIFICATE OF ANALYSIS 5/109

Callett fah Sho/z - com meet 10 2 myll

ES INDUSTRIES, INC. PHONE: (803) 286-3681 PART OF

CLIENT: KOPPERS INDUSTRIES, INC.

7540 NW ST. HELENS ROAD

PORTLAND OR 97210-3663

PHONE: (503) 286-3681

FAK: (503) 285-2831

DATE SUMMITTED: 01/03/19

PROJECT NAME: WASTE WATER TANKS

CI SAMPLE C	TIENTS ID	DATE .	TIME MATRIX	Description	
Principles of the last of the					
000006-001		01/03/2000	1000 Water	WASTE WATER GRU	AB SAMPLB
	a Na JAC (ARI	. ^			

REPORT DAT	PE: 01/05/2000	report number:	000006		<del>4,000,000,000,000,000,000,000,000,000,0</del>	PAGE: 1 OF
SAMPLE	BIBLIANA	PARAMETER	RESULT UNI		DETECTION	TRYIANA
WASTE WATER	GRAB SAMPLE	SAMPLE TO:		1	-	
		1 1		1		
000006-001	O A G TOTAL (HEM)	TOTAL OIL AND GREASE	ND mg	/L	2	Gordon L.
					× .	
						; <del>;</del>
	PHENOLS. TOTAL	TOTAL RECOVERABLE PHENOLICS	0.16 mg	/ <b>L</b>	0.05	Dick R
	1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	į	•	
		· · · · · · · · · · · · · · · · · · ·	**		•	
	PNAH 2	Acenaphthene	7.7 ug	n :	0.05	Jacob f.
	EPA 625 (SIM)	acenaphthylbne.	1.3 ug.	/ <u>X</u> ;	0.05	·
		ANTHRACENE	5/2 ug/	/a.	0.05	
		Benzo (a) anthracens	24 ug.	/1.	0.05	
i.		Benzo (A) Pyrene	42 ug	/L	0.2	
		Benzo (b) Yluoranterne	30 ug,	/£	0.2	
		Benzo (GNI) Perylene	34 ug.	/L	0.5	
3	. :	6BN2O(K) FLUORANTHENE	29 ug.	/ <b>L</b> i	0.2	
•		CHRYSENE	29 ug,	/L	0.03.	
		Dibenzo (AH) anthracene	5.6 ug,	'L	0.3	
		fluorauthene	46 ug.	/J.	0.05	
***		FLUORENE	5.5 ug	/1. <sup>-</sup>	0.05	
		INDENO(1, 2, 3-CD) PYRENE	39 ug,	/1.	D. 4	i.
•		Naphthalene	0.79 " υα	/ይ	0.05	
		PHENANTHRENE	16 ug,	/3.	0.05	
:		PYRENE	42 ug,	L.	0.05	
		<b>8URAOG</b> ATE	778 2 2	COVERY	508-1508	

in Little - Quality Manager

FRÜM : KUPPERS

FAX NO. :5032852831

May. 14 2007 12:32PM P1

KO	P	P	E	R	S
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FAX TRANSMITTAL

7540 N.W. Saint Helens Rd. Portland, Oregon 97210-3663

Phone: (503) 286-3681 Fax: (503) 285-2831 Web Page: www.koppers.com

TO: Traci Sect DATE: 6/14/0>
FROM: J950N/TT TOTAL # OF PAGES: 2

IF THIS TRANSMITTAL IS IN ERROR, PLEASE CALL 503-286-3681 FAX-# 503-285-2831



May 2, 2007

Oregon Department of Environmental Quality Northwest Region 2020 SW Fourth Ave. Suite 400 Portland, OR 97201-4987 Koppers Inc.

Carbon Materials and Chemicals

7540 NW Saint Helons Road Portland, OR 97210-3663 Tel 503-286-3681 Fax 503-285-2831 www.koppers.com

Attention:

Elliot J. Zais

Sr. Environmental Engineer

Reference:

NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of April 07. This report includes the second quarter PAH test results.

For the month, we had one regular discharge of our 220,000 gallon storage tanks, for a total discharge of 220,000 gallons. This discharge of 220,000 gallons was pumped on each of the following days in April: 20<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at 503-286-3681 or via e-mail at: turnertj@koppers.com

Sincerely,

T.J. Turner

Plant Superintendent

Cc:

M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, Kl

PERMITTEE NAME/ADDRESS (NAME Koppers Inc. ADDRESS 7540 Nw Saint Helportland, Or. 9721  FACILITY LOCATION Multnomab County	ens Road 0- <b>3</b> 663	t'Locetion († Different)	OR PERM YEAR FROM 07	HARGE MON (2-36) -000077-9 ATT NUMBER MONI MO DA	DISCONTING PERIOD TO VEAR TO 07	(17-15) 001 HARGE NUMBER	.7430 .01642 □Check here if No NOTE: Read Instr	Discharge	OMB N	oproved. c. 2040-0 d expires	05-31 <sub>;</sub>	-98
PARAMETER		(3 Card Only) (45-53)	QUANTITY OR LOADII (54-61)			JALITY OR CONCE	NTRATION (54-61)		ND.	FREQUEN	77 S.	AMPLE
(32-37)		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MUMIXAM	UNITS	(62-63)	4NALYSI (64-65)	si,	TYPE 59-70)
FLOW	SAMPLE MEASUREN			GPD					0	N/A	C	ALC.
SEE COVER LETTER	PERMIT REQUIREM											
TEMPERATURE	SAMPLE MEASUREM				9.8	10.85	11.9	°C		1/7	G	RAB
EMPERATURE	PERMIT REQUIREM				N/A	N/A	N/A					
РН	SAMPLE MEASUREM				7.7	7,7	7.7	su		1/7	G	RAB
PH	PERMIT REQUIREM				6.0	N/A	9.0	30		<u>.                                    </u>		
OIL & GREASE	SAMPLE MEASUREM	IENT			4.6	4.6	4.6	mg/l		1/7	G	RAB
OIL & GREASE	PËRMIT REQUIREM				0.0	10	. 15					
DARKOT S	SAMPLE MEASUREN				ND	ND	NĐ			1/30	G	RAB
PHENOLS	PERMIT REQUIREM				0.0	0.5	0.7	mg/l				
	SAMPLE MEASUREM											
	PERMIT REQUIREM		·									
	SAMPLE MEASUREM											
	PERMIT REQUIREM			1				1			T	
NAME/TITLE PRINCIPAL EXECUTIVE	E OFFICER	CERTEY UNDER PENALTY OF LAU	NTHATTHS LOCUMENT AND ALL A KYSTON IN ACCORDANCE WITH A DEBRLY GATHER AND EVALUATE	TTACHNENTS WES	E PREPIPED	Alla		TELEPHO			DATE	
Leslie Hyde	)   6   P   S	HAT OUT THE PERSON E PR ASED DX MY NOUTRY OF THE . ERSONS DIRECTLY RESPONS! UPUNTED IS, TO THE SEET OF M AMAZYAGE THAT THERE ARE S	OFFRY GATHER AND ENQUATE IN PRESENT OF PERSONS WHO MAY FERSON OR PERSONS WHO MAY FROM THE MAY BELLET THE MAY BELLET THE MAY BELLET THE FINE AND IMPRESONMENT FOR FINE AND IMPRESONMENT FOR FINE AND IMPRESONMENT FOR FINE AND IMPRESONMENT FOR FINE AND IMPRESONMENT FOR FINE AND IMPRESONMENT FOR FINE AND IMPRESONMENT FOR FINE AND IMPRESONMENT FOR FINE AND IMPRESONMENT FOR FINE AND IMPRESONMENT FOR THE MAY BE AND IMPRESONMENT FOR THE MAY BE AND IMPRESONMENT FOR FINE AND IMPRESONMENT FOR THE MAY BE AND IMPRESONME	THE INFORMATION NAME THE SYSTEM NAME THE SYSTE	SUBNITIED. N. OR THOSE NOOMATION. DOONNIETE PORNATION.		ner	503) 286-3	681	07	05	02
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments tiere)

CC: M. Pronold, City of Portland: T. Self, KI: S. Flynn, KI



# CERTIFICATE OF ANALYSIS

CLIENT: Koppers Industries, Inc.

ATTN: T.J. Turnor

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 288-3681. FAX: (503) 285-2831

REPORT DATE: 04/23/07 10:52

285-2831 SUBMITTED: 04/19/07 08:25

PROJECT NAME: Stormwater Tanks

PAGE: 1 OF 1

CI SAMPLE	CLIENTS ID#		DAT	E TIME M	ATRIX		
7041901-01	Stormwater Tanks		04/1	9/2007 0730 V	ater		
Sample/ Analysi8	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME
7041901-01 General Bench A	SAMPLE ID: Stor	rmwater Tanks					
& G, TOTAL (HEM)		TOTAL OIL AND GREASE	4.6	mg/L	2.0	JRW	04/20/2007 11:06
PHENOLS, TOTAL		TOTAL RECOVERABLE PMENOLICS	ND	mg/L	0,050	DAU	04/19/2007 15:22
		romatography/Mass Spectroscopy	••	- i	****	•	•
PNAH 825	EPA 625 (SIM)	ACENAPHTHENE	3.7	ug/L	0.05	DM	04/20/2007 09:21
	G	ACENAPHTHYLENE	1.1	ug/L	0.05		
		ANTHRACENE	0.8	ug/L	0.05		•
		BENZO(a)ANTHRACENE	11.5	ug/L	0.05		
		BENZO(a)PYRENE	9,9	ug/L	0.05		
		BENZO(b)FLUORANTHENE	7.7	ug/L	0.05		
		BENZO(g,h,l)PERYLENE	6.9	ug/L	0.05		
		BENZO(k)FLUORANTHENE	12.3	ug/L	0.05		
		CHRYSENE	12.2	υ <b>g/L</b>	0.05		
		DIBENZO(a,h)ANTHRACENE	4.7	ug/L	0.05		
		FLUORANTHENE	22.7	ug/L	0.05		
		FLUORENE	1.1	ug/L	0.05		
		INDENO(1,2,3-cd)PYRENE	4.9	ug/L	0.05		
		NAPHTHALENE	3.4	ug/L	0.05		
		PHENANTHRENE	5.6	ug/L	0.05		
		PYRENE	21.8	ug/L	0.05		
		Surrogate: 2-Fluorobiphenyl	65.6 %	%RECOVERY	r 50-150		
		Surrogata: Nitrobenzene-D5	80.0 %	%RECOVER)	60-150		
		Surrogate: p-terphenyl-D14	74.3 %	%RECOVER	50-150		

REPORT NUMBER: 7041901

Commence of

This report may not be reproduced except in full.

Authorized for Release By:

Charles Morrow - Laboratory Director

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland. OR 97203 Ph:(503) 286-9464 Fax:(503) 286-5355 E-mail:cilabqa@ColumbiaInspection.com

FAX NO. :5032852831

May. 02 2007 09:17AM P5

Apr 23 07 11:01a

Labor..cory Staff

(503) 288-5955



# CERTIFICATE OF ANALYSIS

CLIENT: Koppers Industries, Inc.

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3863

PHONE: (503) 286-3681

FAX: (503) 285-2831

PROJECT NAME: Stormwater Tanks

SUBMITTED: 04/19/07 08:25

REPORT DATE: 04/23/07 10:52

REPORT NUMBER: 7041901

PAGE 1 OF 1

CI SAMPLE	CLIENTS ID#		DAT	TIME !	MATRIX		
7041901-01	Stormwater Tanks		04/1	19/2007 0730	Water		
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETENTION LIMIT	TECH	OATE/TIME
7041901-01 General Bench A	SAMPLE ID: Stor	mwater Tanks					
O & G, TOTAL (HEM)	EPA 1664	TOTAL OIL AND GREASE	4,8	mg/l.	2.0	JRVI	4/20/3:007 11: 6
PHENOLS, TOTAL	EPA 420.1	TOTAL RECOVERABLE PHENOLICS	ND	mg/L	0.050	ÖAL	14/19/2007 15: 2
Semi-Volatile On	ganics by Gas Ch	romatography/Mass Spectroscopy				•	• •
PNAH 626	EPA 625 (\$IM)	ACENAPHTHENE	3.7	ugΛ,	0.06	OM	4/20/2007 09: 1
]		ACENAPHTHYLENE .	1.1	ug/L	0.05		
· } .;	•	ANTHRACENE	0.8	ug/L	0.05		
· ·		BENZO(8)ANTHRACENE	11,5	ug/L	ი ენ		
,		BENZO(A)PYRENE	9. <b>9</b>	ug/L	0.05		
4 1		BENZO(b)FLUORANTHENE	7.7	ug/L	0.05		
i s		BENZO(g,h,i)PERYLENE	6.9	ug/L	0.06		
		BENZO(k)FLUORANTHENE	12.3	ug/L	0.05		
1		CHRYSENE	12.2	ug/L	0.05		
,		DIBENZO(a,h)ANTHRACENE	4.7	ug/L	0.95		
		FLUORANTHENE	22.7	Ug/L	0.05		
		FLUORENE	1.1	ug/l.	0.05		
		INDENO(1,2,3-cd)PYRENE	4.9	ug/L	0.05		
		NAPHTHALENE	3.4	<b>บ</b> g/L	0.05		
		PHENANTHRENE	5.6	ug/L	0.05		•
÷		PYRENE	21.B	⊔g/L	0.06		
: .		Surrogate: 2-Fluorobiphenyl	65.6 %	%RECOVER	Y 50-150		
4 t		Surrogate: Nitrobanzane-D6	80.0 %	%RECOVER	Y 50-15G		
		Surrogate: p-t≥rphenyl-D14	74.3 %	%RECOVER	y 50. <b>15</b> 0		

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Authorized for Release By:

Charles Morrow Laboratory Director

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Pht(503) 286-9464 Faxt(503) 286-5365 Ear air citabo accommon language design and citabo accommon language design

P6

2007 09:17AM

: 5032852831

FAX NO.

Koppers002936

FROM : KOPPERS

Month & Year:

April, 2007

MONTHLY FLOW DATA

Gallons per

pumping(all 6

tanks)

# of pump.

# of Days/Emer. Pump.

Emer. Gals.

during the month of Total Gals.

actual discharge

Number of days

Average "slug" discharge per day

220,000

1

0

0.

220,000

#DIV/0!

Days of the month:

**SAMPLE TEST RESULTS** 

unit
C
1
SU
mg/L
n
7 6

# QUARTERLY PAH SAMPLING

Date sample taken:

4/19/2007

Test Results:

130.30

ug/L

( Must be less than 1000 ug/L)

May. 02 2007 09:16AM P1

**KOPPERS** 

FROM : KOPPERS

FAX TRANSMITTAL

7540 N.W. Saint Helens Rd. Portland. Oregon 97210-3663 Phone: (503) 286-3681 Fax: (503) 285-2831 Web Pagè: www.koppers.com

to: Tract	Self 15.	Flynn	DATE:	5/2/0>
FROM: Jason	Christians	on for Tland	2 TOTAL	OF PAGES: 6
71 - 194 - 1944				
IF THIS TRANS	MITTAL IS IN ER	ROR, PLEASE CA	LL 503-286-3681 FA	X·# 503-285-2831

FAX NO. :5032852831

Apr. 04 2007 11:47AM P1



April 4, 2007

Oregon Department of Environmental Quality Northwest Region 2020 SW Fourth Ave. Suite 400 Portland, OR 97201-4987 Koppers Inc.

Carbon Materials and Chemicals

7540 NW Saint Helens Road Portland, OR 97210-3663 Tel 503 286 3681 Fax 503 285 2831 www.koppers.com

Attention:

Elliot J. Zais

Sr. Environmental Engineer

Reference:

NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of March 07.

For the month, we had four regular discharges of our 220,000 gallon storage tanks, for a total discharge of 880,000 gallons. These discharges of 220,000 gallons each were pumped on each of the following days in March: 13<sup>th</sup>, 14<sup>th</sup>, 27<sup>th</sup>, and 28<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at 503-286-3681 or via e-mail at: <a href="mailto:turnertj@koppers.com">turnertj@koppers.com</a>

Sincerely,

T.J. Turner

Plant Superintendent

Cc:

M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, KI

•

### MONTHLY NPDES - DMR - WORK SHEET

Month & Year:

March, 2007

### MONTHLY FLOW DATA

Gallons per

Number of days

pumping(all 6

# of Days/Emer. Pump.

during the month of

Average "slug"

tanks)

# of pump.

Emer. Gals.

Total Gais.

actual discharge

discharge per day

220,000

0

Đ

880,000

#DIV/0!

Days of the month:

### SAMPLE TEST RESULTS

													#of		LIMITS		80% of	<b>.</b> .	ACTUA	L	1
	1	2	3	4	5	ô	7	8	9	10	11	12	Samples	min.	avg.	max.	Max.	min.	avg.	max.	unit
Temperature	11.7	11.6	11.5	11.8	11.0	11.7							6	n/a	n/a	n/a	nla	11.0	11.55	11.8	С
																		1	i	,	
PH	7.7	7.8	7.2	7.7	7.9	7.8				L	<u> </u>		6	6.0		9.0	n/a	7.2	7.68	7.9	su
										<u> </u>	<u> </u>	<b> </b>	li					ĺ	i		
Oil & Grease	2.2	0.0								<u> </u>		<b></b>	2	0	10	15	12	0.0	1.10	2.2	mg/L
										<u> </u>	L								1,		
Phenois	0.052		•	Į.		[		ľ	ł	ŀ	ļ	[ .	] 1	0.0	0.5	0.7	0.56	0.052	0.052	0.052	mg/L

## QUARTERLY PAH SAMPLING

Date sample taken:

Koppers002939

Test Results:

ug/L

( Must be less than 1000 ug/L)

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PERMITTEE NAME/ADDRESS (Inc. ADDRESS 7540 Nw Saint Hel Portland, Or. 9721	ens Road	Location (10.5each)		DISCH OR-			(DMR) (17-13) 001 ARGE NUMBER	47430 101642		C	MB N	oproved. o. 2040-0 ul expires	004 05-31	ı <b>-98</b>
FACILITY Northwest Termin Multnomah County					MO DA 03 1 (22-23) (24-2	TO 07 (25-27) (2	MO DAY 03 31 28-29) (30-31)	☐Check here if N NOTE: Read Inst		-	: ⊃ompl	eting this	i form	
PARAMETER (32-37)		(3 Card Oni (46-	53)	NTITY OR LOADIN (54-61)	IG	[38-45]	JALITY OR CONCE (48-53)	NTRATION (54-61)			NO. EX	FREQUEN OF ANALYSI	CY S	AVPLE TYPE
(02 01)		AVER	AGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MAXIMUM	U	NiTS	(62-63)	(84-68)	(6	39-70)
FLOW	SAMPLE MEASUREM				GPD						0	N/A	C	ALC.
SEE COVER LETTER	PERMIT REQUIREM	ENT			,					<u>-</u>		<u>.</u>	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$	
TEMPERATURE	SAMPLE MEASUREM					11.0	11.55	11.8		°c		1/7	G	RAB
TESTFERATURE	PERMIT REQUIREM	NT				N/A	N/A	N/A						
	SAMPLE MEASUREM					7.2	7.68	7.9		CIV		1/7	G	RAB
PH	PERMIT REQUIREM	ENT				6.0		9.0		SU				
OIL & GREASE	SAMPLE MEASUREM					0.0	1.10	2.2		mg/l		1/7	C	RAB
OIL & GREASE	PERMIT REQUIREM	ENT								ug/				
	SAMPLE MEASUREM	ENT				0.052	0.052	0.052				1/30	G	RAB
PHENOLS	PERMIT REQUIREM					0.0	0.5	0.7		ang/l				
	SAMPLE MEASUREM			_								-		
	PERMIT REQUIREMS	ENT												·
	SAMPLE MEASUREM				·									
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NAME/TITLE PRINCIPAL EXECUTIVE	OFFICER	ERRIFY LINSER PENALT	Y DE LAWTHAE R SI PERMISION	THIS CODINENT AND ALL AT N N ACCORDANCE WITH A S	TACALEMENTS MER	EPREPAGED ON			TE	LEPHON			DATE	
Leslie S. Hyde				THIS CODINENT AND ALL XI N IN ACCORDANCE WITH AS Y 34THER AND EMPLY TO M OR PERSONS WHO MAIN OR PERSONS THE INFO CATHER NO SELTS TRU CAMPONE AND SELTS TRU CAMPONE AND SELTS TRU CAMPONE SERVICENT FOR NO WIENDER SON MENT FOR NO		Charlette.	1.J. Tuch		<u>50</u> 3)-1	286-368	31	07	04	04
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

CC: M. Pronoid, City of Portland: T. Self, KI: S. Flynn, KI

FAX NO. :5032852831

File

lar. 05 2007 11:48AM P1

KOPPER						3
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FAX TRANSMITTAL

7540 N.W. Saint HeTens Rd. Portland, Oregon 97210-3663 Phone: (503) 286-3681 Fax: (503) 285-2831 Web Page: www.koppers.com

TO: Tracz Socr DATE: 3/5/07
FROM: POTTLAND TOTAL # OF PAGES: 4

IF THIS TRANSMITTAL IS IN ERROR, PLEASE CALL 503-286-3681 FAX # 503-285-2831



March 5, 2007

Oregon Department of Environmental Quality Northwest Region 2020 SW Fourth Ave. Suite 400 Portland, OR 97201-4987 Koppers Inc.

Carbon Materials and Chemicals

7540 NW Saint Helens Road Portland, OR 97210-3663

Tel 503 285 3681 Fax 503 285 2831

www.koppers.com

Attention:

Elliot J. Zais

Sr. Environmental Engineer

Reference:

NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais.

Attached please find subject report for the month of February 07.

For the month, we had four regular discharges of our 220,000 gallon storage tanks, for a total discharge of 880,000 gallons. These discharges of 220,000 gallons each were pumped on each of the following days in February: 14<sup>th</sup>, 15<sup>th</sup>, 27<sup>th</sup>, and 28<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at 503-286-3681 or via e-mail at: <a href="mailto:turnerti@koppers.com">turnerti@koppers.com</a>

Sincerely,

Cc:

Plant Superintendent

M. Pronold, City of Portland, Environmental Services

T. Self, KI

S. Flynn, Ki

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EPA Form 3320-1 (10-96)

PERMITTEE NAME	ENAME/ADDRESS (Include Facility Name/Lacation if Offerent)  Keppers Inc.	NATIONAL POLILITANT DISCHARGE SUMINATION SYSTEM (INFCES) DISCHARGE MONITORING REPORT (DMR) (2-16) (17-19)	Form Approved. 47430 OMB No. 2040-0004
ADDRESS	7540 Nw Saint Helens Road	OR-000077-9 001 PERMIT NUMBER DISCHARDE NUMBER	Approval expires 05-31-99 101642
	Portland, Or. 97210-3663	MONITORING PERIOD	
FACILITY LOCATION	Northwest Terminal	YEAR         MO         DAY         YEAR         MO         DAY           FROM         07         02         81         TO         07         02         28	Check here if No Discharge
LOCATION	Multnomah County	(20-21) (22-23) (24-25) (25-27) (28-29) (30-31)	NOTE: Read Instructions before completing this form

PARAMETER		(3 Card Only) QU/ (46-53)	ANTITY OR LOADII (84-61)	NG	(4 Card Only) QU (38-45)	JALITY OR CONCE (46-53)	NTRATION (54-61)		.₩0. EX	FREQUENCY	SAVELE TYPE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63)	A:(41.YSIS (64-88)	(69-70)
FLOW	SAMPLE MEASUREMENT			GPD	·				0	N/A	CALC.
SEE COVER LETTER	PERLIT REQUIREMENT										
	SAMPLE MEASUREMENT				6.8	8.0	9.3	°		1/7	GRAB
TEMPERATURE	PERMIT REQUIREMENT				N/A	N/A	N/A	] '			
	SAMPLE MEASUREMENT				7.5	7.7	7.8	GI.		1/7	GRAB
PH	PERMIT REQUIREMENT				6.0		9.0	su			
OIL & GREASE	SAMPLE MEASUREMENT				2.4	4,7	7.0	mg/l		1/7	GRAB
OIL & GREASE	PERMIT REQUIREMENT				0.0	10.0	15.0	1 11/2/1			
	SAMPLE MEASUREMENT				0.13	0.13	0.13			1/30	GRAB
PHENOLS	PERMIT REQUIREMENT				0.0	0.5	0.7	mg/l			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT							]			
	SAMPLE MEASUREMENT										
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NAME/TITLE PRINCIPAL EXECUTIV	E OFFICER ICERT	TUNDER PENALTY OF LAW TH	ATTHS DOCUMENT AND ALL	ATTAC EMBATS VA	PREPARED	1100		TELEPHO!	NE .	D/	VIE.
Leslie S. Hyde	THAT OF BASEST PERSON SUBMET FAME AT INCLED	TUNDER PENALTY OF UNIT THE MET OF CHAPTER AND STREET, THE STREET,	PLY GRITER AND EVALUATE SON OR PERSONS VIND WAR FOR GATHERING THE INF YOUNGERGEAND AS EAFTER FICANT PERSONNENT FOR	THE NEGRAMIO NAGE THE SYSTE ORMATION, THE UE, ACCUPATE AN SWITTING FALSE I KNOWING WICLAT	N SUBMITTED, PM, OA THOSE IVECASIATION AD COMPLETE INSTERNATION TONS. SEE 18	T.J. Tur		5 <b>6</b> 3) 286-36	181	87	03 05
TYPED OR PRINTED			Paradisa under these statetes: residue and 5 years.)	'ay ira udo fir as - p	Sign CF	FICER OR AUTHORIZ	ED AGENT A	TEA NUMS	BER	YEAR !	O DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

CC: M. Pronold, City of Portland: T. Self, KI: S. Flyan, KI

#### **MONTHLY NPDES - DMR - WORK SHEET**

Month & Year:

February, 07

MONTHLY FLOW DATA

Gallons per

pumping(all 6

tanks)

# of pump.

# of Days/Emer. Pump.

Emer. Gals.

Number of days during the month of

actual discharge

Average "slug" discharge per day

0

0

880.000

Total Gals.

#DIV/0!

Days of the month:

220.000

SAMPLE TEST RESULTS

•													# of	I	LIMITS	<u> </u>	80% of	L/	CTUA	L [	1	ä
	1	2	3	4	5	6	7	8	9	10	11	12	Samples	min.	avg.	max.	Max.	min.	avg.	max.	unit	285
Temperature	9.3	8.5	8.3	7.1	7.7	6.8							6	n/a	n/a	n/a	n/a	6.8	8.0	9.3	С	<b>-</b> 28
								L	<u></u>	L										1		3
PH	7.7	7.7	7.5	7.8	7.7	7.8		<u> </u>					6	6.0		9.0	л/а	7.5	7.7	7.8	รบ	
	ļ		<u> </u>		ļ					<b> </b>	<u> </u>											
Oil & Grease	7.0	2.4	<u> </u>	<u> </u>	<u> </u>		<u></u>	<b></b>		ļ	<u> </u>	<u> </u>	2	0	10	15	12	2.4	4.7	7.0	mg/L	
			ļ	ļ			<u> </u>		<u> </u>	<b> </b>	<u> </u>	ļ	1 1							1		
Phenois	0.13		ŀ		1			l		1	[	[	1 1	0.0	0.5	0.7	0.56	0.13	0.13	0.13	mg/L	

#### QUARTERLY PAH SAMPLING

Date sample taken:

Test Results:

ug/L

( Must be less than 1000 ug/L)

5032852831

FAX NO. :5032852831

Dec. 07 2006 05:02PM

Carbon Materials and Chemicals

7540 NW Saint Helens Road

Portland, OR 97210-3663

Tel 503 286 3681

Fax 503 285 2831 www.koppers.com



December 7, 2006

FROM : KOPPERS

Orcgon Department of Environmental Quality Northwest Region 2020 SW Fourth Ave. Suite 400 Portland, OR 97201-4987

Attention:

Elliot J. Zais

Sr. Environmental Engineer

Reference:

NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of November 2006. Also, attached please find the 4th quarter PAH test results.

For the month, we had eight regular discharges of our 220,000 gallon storage tanks, for a total discharge of 1,760,000 gallons. These discharges of 200,000 gallons each were pumped on each of the following days in November: 3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup>, 9<sup>th</sup>, 22<sup>nd</sup>, and 24<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at 503-286-3681 or via e-mail at: turnerti@koppers.com

Sincerely,

General Foreman

Post-it\* Fax Note Date 7671 Phone Phone Fax #

M. Pronold, City of Portland, Environmental Services Cc:

T. Self, KI

S. Flynn, KI

FROM : KÖPPERS

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NATIONAL POLLIFFANT DISCHARGE FLIMINATION SYSTEM (NPDES) Form Approved. OMB No. 2040-0004 DISCHARGE MONITORING REPORT (DMR) NAME 47430 Koppers Inc. (2-16) Approval expires 05-31-98 7540 Nw Saint Helens Road OR-000077-9 1001 ADDRESS 101642 PERMIT NUMBER DISCHARGE NUMBER Portland, Or. 97218-3663 MONITORING PERIOD Check here if No Discharge YEAR MO DAY YEAR | MO | DAY **FACILITY** Northwest Terminal LOCATION FROM 06 11 NOTE: Read Instructions before completing this form 11 06 30 Multnomah County (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) QUANTITY OR LOADING PREQUENCY (3 Card Only) (4 Card Only) QUALITY OR CONCENTRATION NO. SAMPLE PARAMETER OF ANALYSIS (54-61) (46-53) (54-61) (38-45) (48-53) FX TYPE (32-37) (62-63) UNITS UNITS. **AVERAGE** MINIMUM AVERAGE MAXIMUM (64-68) (69-70) MAXIMUM SAMPLE CALC. FLOW N/A ß **GPD** MEASUREMENT PERMIT SEE COVER LETTER REQUIREMENT SAMPLE **GRAB** 0 1/7 17.6 9.2 129 MEASUREMENT C TEMPERATURE PERMIT N/A N/A N/A REQUIREMENT SAMPLE GRAB 1/7 7.4 7.6 a 7.2 MEASUREMENT PН SU PERMIT 6.0 9.0 REQUIREMENT SAMPLE GRAB 1/7 0.0 1.0 3.0 MEASUREMENT mg/L OIL & GREASE PERMIT 10.0 15.0 0.0 REQUIREMENT SAMPLE GRAB 0.0 0.0 0.0 1/30 MEASUREMENT **PHENOLS** mg/L PERMIT 0.0 0.5 0.7 REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT ICERTIFY UNDER PENKLYY OF LAWTHAT THIS DOCUMENT AND ALLATTACHAID. THE WERE PREMARED UNDER AND DIRECTION OR SUPERVISION IN ACCOMPANIEW HAVE STEED REGIONED TO ASSURE THAT TOUR LESS PREMARED BY A STATE PROPERTY OF THE PENSONS WHO MANAGE THE STRITTEN OR THOSE PERSONS DIRECTLY REPORTSONS BILL FOR CANTELEND IT HE INFORMATION THE PREMARM OR THOSE PERSONS DIRECTLY REPORTSONS BILL FOR CANTELEND IT HE INFORMATION. THE THORPHATION BUILDED THAT THE ACCUMENT AND COMMENTED AND ADMINISTRATION FOR ADMINISTRATION FOR ANY PENDALIZED FOR A STATE THE PROPERTY OF THE AND INFORMATION FOR STATE AND COMMENT FOR A STATE PROPERTY OF THE AND INFORMATION FOR ANY PENDALIZED FOR STATE THERE ARE STRIFFED ANY FEMALIZED FOR STATE FOR A S NAME/TITLE PRINCIPAL EXECUTIVE OFFICER TELEPHONE DATE 7503) 286-3681 02 06 12 .Turner Leslie S. Hyde SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT AREA CODE TYPED OR PRINTED NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

FAX NO. :5032852831

Nov. 02 2006 04:01PM P1

KOPPERS

Post-It® Fax Note 7671	Date # of pages 2
TOTRACI Self Co./Dept.	From Market
Co./Dept.	Co.
Phone #	Phone #
Fax#	FAx #

Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503-286-3681
Fax 503-285-2831
www.koppers.com

November 3, 2006

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642
Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of October 2006.

There were no discharges during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: turnertj@koppers.com

Sincerely,

T. J. Turner

General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S, Flynn, KJ

04:01PM

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) NAME

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

OR-000077-9 PERMIT NUMBER

(20-21) (22-23) (24-25)

FROM

47430 100 DISCHARGE NUMBER 101642

(26-27) (28-29) (30-31)

MONITORING PERIOD YEAR MO DAY YEAR MO DAY 06 10 1 06 10 31

Check here if No Discharge

NOTE: Read Instructions before completing this form

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PARAMETER (32-37)		(3 Card Only) QU/ (46-53)	NTITY OR LOADIN (54-61)	G	(4 Card Only) QU (38-45)	ALITY OR CONCE (46-53)	VTRATION (54-61)		NO.	FREQUENCY OF	SAMPLE TYPE
(32-31)		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MUMIXAM	UNITS	(82-63)	ANALYSIS (64-68)	(69-70)
FLOW	SAMPLE MEASUREMENT			GPD					0	N/A	CALC.
SEE COVER LETTER	PERMIT REQUIREMENT										
TEMPERATURE	SAMPLE MEASUREMENT							0	0	1/7	GRAB
TEMPERATURE	PERMIT REQUIREMENT				N/A	N/A	N/A				
DYL	SAMPLE MEASUREMENT							CII	0	1/7	GRAB
PH	PERMIT REQUIREMENT				6.0		9.0	SU			
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Koppers002948

FAX NO. :5032852831

FROM : KOPPERS



Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

October 3, 2006

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of September 2006.

There were no discharges during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via c-mail at: <a href="mailto:turnertj@koppers.com">turnertj@koppers.com</a>

Sincerely,

T. J. Rurner

General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S, Flynn, KI

FROM : KOPPERS EPA Form 3320-1 (10-96)

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PERMITTEE NAME	E NAME/ADDRESS (1)  Koppers Inc.	dute Fedity	Nameloca	rtion if Different)	NATIONAL PI DISCI	HARGE MON	HARGE ELIMINATION SY VITORING REPORT	r (DMR)		- (	OMB N	proved. p. 2040-000	)4	
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FROM : KOPPERS

FAX NO. :5032852831

Sep. 06 2006 01:52PM P1

KOPPE
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**FAX TRANSMITTAL** 

7540 N.W. Saint Helens Rd. Portland. Oregon 97210-3663 Phone: (503) 286-3681 Fax: (503) 285-2831 Web Page: www.koppers.com

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(REPLACES EPAFORM T-40 WHICH MAY NOT BE USED.)

NATIONAL POLI LITANT DISCHARGE ELIMINATION SYSTEM INPOES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

Form Approved.
OMB No. 2040-0004

PAGE

OF

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

Koppers Inc.

NAME

Koppers002952

EPA Form 3320-1 (10-96)



Koppers Inc.

Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

August 6, 2006

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Avc., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642
Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of August 2006, including the third quarter PAH test results.

For the month, we had one regular discharge of our 220,000-gallon storage tanks, for a total discharge of 220,000 gallons. This discharge of 220,000 gallons was pumped on August 25<sup>th</sup> There were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: turnerti@koppers.com

Sincerely,

T. L. Turner General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI S, Flynn, KI PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Cifferent)

NAME

Koppers Inc.

ADDRESS

7540 Nw Saint Helens Road Portland, Or. 97210-3663

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(7-19)
(7-19) OR-000077-9

PERMIT NUMBER

001 DISCHARGE NUMBER

47430 101642

FACILITY LOCATION Northwest Terminal Multnomah County

MONITORING PERIOD YEAR I MO DAY YEAR MO DAY FROM 08 01 TO 06 08 31 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

☐Check here if No Discharge

NOTE: Read Instructions before completing this form

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

				(22-23) (24-		28-29) (30-31)					
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FLOW	SAMPLE MEASUREMENT			GPD					0	N/A	CALC
SEE COVER LETTER	PERMIT REQUIREMENT						· .	}			
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TEMPERATURE	PERMIT REQUIREMENT				N/A	N/A	N/A			·	
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Koppers002954

FROM : KOPPERS

FAX NO. :5032852831

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Sep. 06 2006 01:22PM P1

Aug 25 06 02:31p

## CERTIFICATE OF ANALYSIS

CLIENT: Koppers Industries, Inc.

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

SUBMITTED: 08/23/06 11:45

PROJECT NAME: Stormwater Tanks

REPORT DATE:	08/25/06 15:06  CLIENTS IDN  DRAFT: Storm Webst	REPORT NUME	3ER: 608	2306				PAGE: 1 O
CI SAMPLE								
	DEAFT- Storm Winter		(	DATE	TIME	MATRIX		
3082308-01	CARA I CALPAIN AACING	Tanks		08/23/2006	1100	Water	•••	1
B082309-02	DRAFT: Storm Water 1	lanks .		08/23/2006	1100	Water		
6082306-03	DRAFT: Storm Water 1	l'enks		08/23/2008	1100	Water		
Sample/ Analysib	METHOD	PARAMETER	RESULT	IS UN	ITS	DETECTION	TECH	DATE/TIME
082305-01 DRAFT: General I		T: Storm Water Tanks		<del></del>				
PHENOLS, TOTAL	EPA 420.1	TOTAL RECOVERABLE PHENOLICS	ND	mgÆ	ı	0.050	DAU	08/24/2006 14:17
	EPA 625 (SIM)	ACENAPHTHENE AGENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(a)PYRENE BENZO(a)FLUORANTHENE BENZO(a)LIPERYLENE BENZO(a)LIPERYLENE CHRYSENE DIBENZO(a)LIPERYLENE FLUORANTHENE FLUORANTHENE FLUORANTHENE INDENO(1,2,3-ca)PYRENE NAPHTHALENE	ND 2.5 10.1 0.7 0.2 ND ND ND ND 0.7 ND 7.7 5.8 ND	Ug/L Ug/L Ug/L Ug/L Ug/L Ug/L Ug/L Ug/L		0.05 0.05 0.05 0.05 0.05 0.05 0.05 0.05	DM .	Q8/25/2004 15.16
		PHENANTHRENE PYRENE	ND 6.7	ug/L ug/L		0.05 0.05		
		Surrogate: 2-Fluorobiphonyl	149 %	•	ECOVER			
		Surrogate: Nitrobenzene-05	90.9 %		-	IY 50-150		
		Surrogate: p-terphonyl-D14	142 %			Y 50-150		
082306-03 RAFT: General E	SAMPLE ID: DRAFT Bench Analysis	f: Storm Water Tanks	3.2				V 1	405-6-27-7
G, TOTAL (HEM)		TOTAL OIL AND GREASE	ND	mg/L		2.0	JRW	08/25/2008 14 28

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DRAFT REPORT - DATA SUBJECT TO CHANGE

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Ph;(503) 286-9464 Fax:(503) 286-5355. E-mail:citabqa@ColumbiaInspection.com

FAX NO. :5032852831



Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

August 1, 2006

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of July 2006.

There were on discharges during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: turnertj@koppers.com

Sincerely,

T. J. Purner General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI S, Flynn, KI

PERMIT	TEE NAME/ADDRESS (Include Facility Name/Location if Different)	
NAME	Konners Industries Inc.	

7540 NW Saint Helens Road

Portland, OR. 97210-3663

FACILITY Northwest Terminal LOCATION Multnomah County

**ADDRESS** 

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM INPOESI DISCHARGE MONITORING REPORT (DMR)
(2-16) (37-19)

OR-000077-9 PERMIT NUMBER

001 DISCHARGE NUMBER

MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM 06 67 01 TO 96 97 3/ (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) 47430

101642

Micheck here if No Discharge

NOTE: Read Instructions before completing this form

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

PARAMETER		(3 Card Only) QU/ (48-53)	ANTITY OR LOADIN	(22-23) (24- IG		(4 Card Only) QUALITY OR CONCENTRATION				FREQUENCY	SAMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(62-63) EX	PICKIPAT	TYPE (69-70)
FLOW	SAMPLE MEASUREMENT			GPD					0	N/A	CALC
SEE COVER LETTER	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT								0	1/7	GRAB
TEMPERATURE	PERMIT REQUIREMENT				N/A	N/A	N/A	C			
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CC: M. Pronold, City of Portland; T. Self, KI; S. Plynn, KI

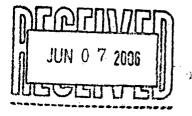
Carbon Materials and Chemicals 7540 NW Saint Helens Road Portland, OR 97210-3663 Tel 503 286 3681 Fax 503 285 2831

www.koppers.com

FROM : KOPPERS

FAX NO. :5032852831





June 6, 2006

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of May 2006, including the second quarter PAH test results.

For the month, we had one regular discharges of our 220,000-gallon storage tanks, for a total discharge of 2240,000 gallons. This discharge of 220,000 gallons was pumped on May 25<sup>th</sup> and 28<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via c-mail at: turnertj@koppers.com

Sincerely,

T. J. Furner General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S, Flynn, KJ

Euvironmental Dept. Document Control									
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	File Date:								

Koppers002959

PERMITTEE NAME/ADDRESS (Include Facility Name/Location of Cifferent) NATIONAL POLLITANT DISCHARGE FLEARNATION SYSTEM INPOESS Form Approved. DISCHARGE MONITORING REPORT (DMR) OMB No. 2040-0004 Koppers Industries, Inc. (17-191 12-15) Anoroval expires 05-31-98 OR-000077-9 വ 47430 ADDRESS 7540 NW Saint Helens Road DISCHARGE MURIER PERMIT NUMBER Portland, OR. 97210-3663 101642 MONITORING PERIOD Check here if No Discharge FACILITY YEAR MO L DAY YEAR MO DAY Northwest Terminal LOCATION FROM 06 05 01 TO 06 05 31 NOTE: Read instructions before completing this form Multnomah County (20-21) (22-23) (24-25) (28-27) (28-29) (30-31) QUANTITY OR LOADING QUALITY OR CONCENTRATION FREQUENCY OF ANALYSIS (3 Card Only) (46-53) (4 Card Only) NO. PARAMETER SAMPLE (54-61) (54-61) (38-45) (48-53) FX (32-37) TYPE **AVERAGE** MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM UNITS (62-63 (69-70) (84-68) SAMPLE FLOW CALC Ô N/A MEASUREMENT CPD SEE COVER LETTER REQUIREMENT SAMPLE 14.1 15.6 16.7 0 1/7 **GRAB** MEASUREMENT O **TEMPERATURE** PERMIT C N/A N/A REQUIREMENT N/A SAMPLE 7.2 7.4 7.5 MEASUREMENT 0 1/7 **GRAB** SU PH PERMIT 6.0 9.0 REQUIREMENT SAMPLE <2.0 <2.0 <2.0 MEASUREMENT 0 1/7 GRAB OIL & GREASE mg/L PERMIT REQUIREMENT 0.0 10.0 15.0 SAMPLE <0.050 <0.050 <0.050 MEASUREMENT 1/30 **GRAB** mq/L PHENOLS PERMIT

0.0

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

R. D. Collins

TYPED OR PRINTED

ICERTITY UNDESCRIPTION OR BUPERFORM IN ADDITIONAL ATTACHMENTS WERE PREPARED UNDER NY DIRECTION OR BUPERFORM IN ACCORDANCE WITH A SYSTEM DESCRIPED TO ASSURE THAT CHAIR FILED PERSONNEL PROPERTY CONTROL PROPERTY OF THE PERSON SON LINET THE PROPARATION SUBPRIFIED AND AND AN AND THE SYSTEM. OR THOSE PERSONS DESCRIPTION OR PERSONS WHO MANAGE THE SYSTEM. OR THOSE PERSONS DESCRIPTION THE PROPARATION SUBPRIFIED OR SATHERING IN THE PROPARATION SUBPRIFIED AND STATE AND CONFIDENCE AND BRIDE THE LOCK NATE. AND CONFIDENCE AND BRIDE THE LOCK NATE. AND CONFIDENCE AND BRIDE SON SUBPRIFIED AND STATE PROPARATION INCLUDING THE POSSIBILITY OF FIVE AND INPROPARATION INCLUDING THE POSSIBILITY OF FIVE AND INPROPARATION INCLUDING THE POSSIBILITY OF FIVE AND INPROPARATION INCLUDING THE POSSIBILITY OF FIVE AND INPROPARATION INCLUDING THE POSSIBILITY OF FIVE AND INPROPARATION INCLUDING THE POSSIBILITY OF FIVE AND INPROPARATION INCLUDING THE POSSIBILITY OF FIVE AND INPROPARATION INCLUDING THE POSSIBILITY OF FIVE AND INPROPARATION INCLUDING THE POSSIBILITY OF FIVE AND INPROPARATION INCLUDING THE POSSIBILITY OF FIVE AND INPROSONMENT FOR KNOWING VICUATIONS. BEET IS

T. J. Turner 503 286–36

Signature of Principal executive OFFICER OR AUTHORIZED AGENT ASSA NUMBER

0.5

503, 286-3681, 06, 06, 06

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

REQUIREMENT

SAMPLE
MEASUREMENT
PERMIT
REQUIREMENT
SAMPLE
MEASUREMENT
PERMIT
REQUIREMENT

CC: M. Pronold, City of Portland; T. Self, KI; S. Flynn, KI

0.7

DATE

FROM : KOPPERS

FAX NO. :5032852831



Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681

Fax 503 285 2831

www.koppers.com

May 5, 2006

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Avc., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of April 2006, including the second quarter PAH test results.

For the month, we had two regular discharges of our 220,000-gallon storage tanks, for a total discharge of 440,000 gallons. This discharge of 220,000 gallons was pumped on April 13<sup>th</sup> and 14<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: turnertj@koppers.com

Sincerely,

T.J. Turner General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI S, Flynn, KI

Dave Recent

Lingal

Approved:

Copp

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	Environmental Dept. Document Control
	Date Received: 55/00
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PHENOLS

PERMITTEE NAME/ADDRESS (Include Feditary Names Octation if Descript NATIONAL POLILITANT DISCHARGE ELEMATION SYSTEM INPOESI DISCHARGE MONITORING REPORT (DMR) MAME Koppers Industries, Inc. (2-15) OR-000077-9 001 47430 ADDRESS 7540 NW Saint Helens Road PERMIT NUMBER DISCHARGE MARKER Portland, OR, 97210-3663 101642 MONITORING PERIOD ☐Check here if No Discharge YEAR MO DAY YEAR MO DAY FACILITY Northwest Terminal FROM 06 04 01 TO 06 04 30 LOCATION NOTE: Read instructions before completing this form Multnomah County (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) QUANTITY OR LOADING QUALITY OR CONCENTRATION (3 Card Only) 14 Certi Onlyi PARAMETER 146-53) (54-61) 136 45 (48-53) (32-37) AVERAGE MAXIMIM UNITS MINIMUM AVERAGE SAMPLE FLOW MEASUREMENT GPD PERMIT SEE COVER LETTER REQUIREMENT SAMPLE 12.2 13.2 MEASUREMENT TEMPERATURE PERMIT REQUIREMENT N/A N/A SAMPLE MEASUREMENT 6.8 7.0 PH PERNIT 6.0 REQUIREMENT SAMPLE MEASUREMENT <2.0 <2.0 OIL & GREASE PERMIT REQUIREMENT 0.0 10.0

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< 0.050

0.0

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SAMPLE

MEASUREMENT

PERMIT REQUIREMENT (54-61)

MAXIMUM

14.1

N/A

7.2

9.0

<2.0

15.0

<0.050

0.7

<0.050

0.5

OFFICER OR AUTHORIZED AGENT

TYPED OR PRINTED

EPA Form 3320-1 (10-96)

MO

DAY

YEAR

Form Approved. OMB No. 2040-0004

Approval expires 05-31-98

FREQUENC

ANALYSIS

(64-68)

N/A

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1/30

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UNITS

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NUMBER

SAMPLE

(69-70)

CALC

GRAB

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GRAB

**GRAB** 



### CERTIFICATE OF ANALYSIS

CLIENT: Koppers Industries, Inc.

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3663

PROJECT NAME: Quarterly Stormwater Test

PROJECT NUMBER: quarterly atormwater

PHONE: (503) 286-3681

FAX: (503) 285-2831

**8UBMITTED: 04/11/06 09:40** 

REPORT DATE:	04/13/06 11:13	REPORT NUM	BER: 604110	)2			PAGE: 1 OF 1
CI SAMPLE	CLIENTS ID#		DAT	E TIME I	MATRIX		
0041102-01	Stormwater Tanks		04/1	1/2006 0800 1	Vater		
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION	TECH	DATE/TIME
6041102-01 General Bench A	SAMPLE ID: Storm	water Tanks					
O & G, TOTAL (HEM)	EPA 1684	TOTAL OIL AND GREASE	ND	mg/L	2.0	JRW	D4/11/2006 14:27
PHENOLS, TOTAL	EPA 420.1	TOTAL RECOVERABLE PHENOLICS	ND	mg/L	0.050	DAU	04/12/2006 11:53
Semi-Volatile Ord	anics by Gas Chro	matography/Mass Spectroscopy					1
PNAH 625	EPA 625 (SIM)	ACENAPHTHENE	2.1	ug/L	0.05	DM	04/11/2006 23:27
		ACENAPHTHYLENE	0.2	ug/L	0.05		
		ANTHRACENE	0.4	ug/L	0,05		
		BENZO(a)ANTHRACENE	0.5	ug/L	0.05		
		BENZO(a)PYRENE	0.8	ug/L	0.05		
		BENZO(b)FLUORANTHENE	0.7	ug/L	0.05		
		BENZO(g,h,i)PERYLENE	0.5	ug/L	0.05		
		BENZO(k)FLUORANTHENE	0.5	ug/L	0.05		,
		CHRYSENE	0.7	ug/L	0.05		
		DIBENZO(a,h)ANTHRACENE	0.2	υg/L	0.05		
		FLUORANTHENE	2.8	ug/L	0.05		
		FLUORENE	0.3	ug/L	0.05		
	-	INDENO(1,2,3-cd)PYRENE	0.4	ug/L	0.05		
		NAPHTHALENE	0.05	ug/L	0,05		
		PHENANTHRENE	0.3	ug/L	0.05		
		PYRENE	1.8	ug/L	0.05		
		Surrogate: 2-Fluorobiphenyl	66.2 %	%RECOVER	Y 50-150		•
		Surrogate: Nitrobenzene-D5	74.9 %	%RECOVER	Y 50-150		
		Surrogate: p-terphenyl-D14	89.9 %	%RECOVER	Y 50-150		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Total 11.58 0g/L

ONG:NAL

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Authorized for Release By:

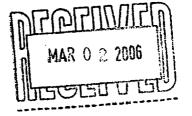
Richard D. Reid - Laboratory Director

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Ph:(503) 286-9464 Fax:(603) 286-5355 E-mail:cliabqa@ColumbiaInspection.com

FROM : KOPPERS

FAX NO. :5032852831





Koppers Inc.

**Carbon Materials and Chemicals** 

7540 NW Saint Helens Road Portland, OR 97210-3663 Tel 503 286 3681 Fax 503 285 2831

www.koppers.com

March 1, 2006

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of February 2006.

For the month, we had one regular discharge of our 220,000-gallon storage tanks, for a total discharge of 220,000 gallons. This discharge of 220,000 gallons was pumped on February 23rd. There were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: turnerti@koppers.com

Sincerely,

General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S, Flynn, KI

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Officeral)

NAME , Koppers Industries, Inc.

ADDRESS 7540 NW Saint Helens Road

Portland, OR. 97210-3663

FACILITY LOCATION Northwest Terminal Multnomah County NATIONAL POLLUTANT DISCHARGE ELMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
[17-19]

OR-000077-9
PERMIT NUMBER

001 DISCHARGE NUMBER

MONITORING PERIOD

YEAR MO DAY

O6 02 01 TO 06 02 28

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

47430

101642

Check here if No Discharge

NOTE: Read Instructions before completing this form

Form Approved. OMB No. 2040-0004 Approval expires 05-31-98

PARAMETER (32-37)		(3 Cerd Only) QUANTITY OR LOADING (48-53) (54-61)			(4 Card Only) QU (38-45)	VTRATION (54-61)	)		NO. FREQUENCY		
		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MAXIMUM	M UNITS (62-63) (64		ANALYSIS (64-68)	(69-70
FLOW	SAMPLE MEASUREMENT			GPD					0	N/A	CAL
SEE COVER LETTER	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT				6.5	6.8	7.1		0	1/7	GRA
TEMPERATURE	PERMIT REQUIREMENT				N/A	N/A	N/A	C			
	SAMPLE MEASUREMENT				7.0	7.1	7.2		0	1/7	GRA
PH	PERMIT REQUIREMENT				6.0		9.0	SU			
OTI A CORNER	SAMPLE MEASUREMENT				5.8	5.8	5.8	/r	0	1/7	GRA
OIL & GREASE	PERMIT REQUIREMENT				0.0	10.0	15.0	mg/L			
PHENOLS	SAMPLE MEASUREMENT				0.14	0.14	0.14	mg/L	0	1/30	GRA
THERODO	PERMIT REQUIREMENT				0.0	0.5	0.7				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		·								
	SAMPLE MEASUREMENT						<u>.                                   </u>				
	PERMIT REQUIREMENT					1					
ME/TITLE PRINCIPAL EXECUTIV	E OFFICER LOSTING	UKDER PEWLTY OF LAW THAT Y DIRECTION OR SUPERVISIO	TTHIS DOCUMENT AND ALL AS IN IN ACCORDANCE WITH A S	TACHNENTS WER	E PREFARED D TO ASSURE	THE		TELEPHON	E	D/	TE
R. D. Collins	BASED OF PERSONS SUBMITTE	USDER PERALTY OF LAW THAT Y BIRECTION OR SUPERNISCE LINES PROPER AWY INCLUSIVE PROPERS AND THE PERSE OR SUPERIL PROPERS OF SUPERIL PROPERS OF WYW ARE THAT THE BEST OF WYW ARE THAT THE BEST OF WYW ARE THAT THE ARE SOME STORE THE POSSIBILITY OF FIRE OTHER OF THE POSSIBILITY OF FIRE OTHER OF THE POSSIBILITY OF FIRE OTHER OF THE POSSIBILITY OF FIRE OTHER OTHER OF THE POSSIBILITY OF FIRE OTHER OTHE	LY CATHER AND EVALUATE T DI CATHERISONS WHID MAN FOR GATHERING THE INFO COVALEDGE AND BELIEF, TRUE CAMT PENALTIES FOR SUB- CAMT PENALTIES FOR SUB- AND IMBRIES WISENT FOR SUB-	HE REFORMATION MGE THE SYSTEM MATION, THE IN L. ACCURRATE, AND MOTING FALSE IN MOTING FALSE IN	SUBMITTED 4, OR THOSE TO COMPLETE FORMATION DISCOMPLETE FORMATION	. Turner		503 <sub>1</sub> 286-:	3681	06	03 0
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Koppers002966

FAX NO. :5032852831

Mar. 01 2006 01:52PM P3

Feb 20 06 12:10p Columnia Inspection 5002605055



# CERTIFICATE OF ANALYSIS

CLIENT: Koppers industries, Inc.

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 286-3681

PROJECT NAME: Stormwater Tanks

Į	FAX: (503) 285-	2831	SUE	BMITTED:	02/22/06 09:4	45	
REPORT DATE:	02/23/06 10:52	REPORT NUME	BER: 602220	)5			PAGE: 1 OF 1
CI SAMPLE	CLIENTS ID#		DAT	E TIME	MATRIX		
6022205-01	DRAFT: Stormwater	Tanks	02/2	2/2006 0800	Water		
8022205-02	DRAFT: Stormwater	Tanks	02/22/2008 0800 Water				
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME
6022205-01 DRAFT: General		FT: Stormwater Tanks					
O & G. TOTAL (HEM)	EPA 1684	TOTAL OIL AND GREASE	5.8	mg/L	2.0	JRW	02/23/2008 10:36
6022205-02 DRAFT: General		FT: Stormwater Tanks					
PHENOIS TOTAL	EDA 420 1	TOTAL DECOVERABLE PHENOLICS	0.44	mell	0.050	OALL	02/23/2008 40/67

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DRAFT REPORT - DATA SUBJECT TO CHANGE

COLUMBIA INSPECTION, INC.

7133 N. Lombard, Portland, OR 97203 Phone:(503) 286-9464 Fax:(503) 286-5355 E-mail:lab@ColumbiaInspection.com

FAX NO. :5032852831

FROM : KOPPERS



Koppers Inc.

Carbon Matorials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

February 2, 2006

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of January 2006. Also, attached please find the 1<sup>st</sup> quarter PAH test results.

For the month, we had eleven regular discharges of our 220,000-gallon storage tanks, for a total discharge of 2,400,000 gallons. These discharges of 220,000 gallons each were pumped on each of the following days in January::4<sup>th</sup>, 5<sup>th</sup>, 6<sup>th</sup>, 7<sup>th</sup>, 11<sup>th</sup> 12<sup>th</sup>, 18<sup>th</sup>, 19<sup>th</sup>, 27<sup>th</sup>, 30<sup>th</sup> and 31<sup>st</sup>. There were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: <a href="mailto:turnerti@koppers.com">turnerti@koppers.com</a>

Sincercly,

T. J. Turner

General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

S, Flynn, KI

PERMITTEE NAME/ADDRESS (From Facility Name Location & Different) NAME Koppers Industries, Inc. ADDRESS 7540 NW Saint Helens Road Portland, OR. 97210-3663  FACILITY LOCATION Northwest Terminal Multnomah County	(3 Card Only)	7
NAME Koppers Industries, Inc. ADDRESS 7540 NW Saint Helens Road	CONTION	
	75 TO THE BOTTLE METERS WOOD	

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (OMR) (2-18) (17-19)	Form Approved. OM8 No. 2040-0004 Approval expires 05-31
OR-000077-9 001 PERMIT NUMBER DISCHARGE NUMBER	47430 101642
MONITORING PERIOD YEAR MO DAY I YEAR MO DAY	IO1042  Check here if No Discharge
FROM 06 01 01 TO 06 01 31 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)	NOTE: Read Instructions before completing this form
DUANTITY OR LOADING (4 Card Only) OHALITY OR CON	ICENTRATION ERECHENCY

PARAMETER		(3 Card Only) QU: (46-53)	ANTITY OR LOADII	(22-23) (24- NG		JALITY OR CONCE (46-53)	NTRATION (54-81)		NO.	FREQUENC	SAMPLE
(32-37)		AVERAGE	MUMIXAM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(82-63)	ANALYSIS (64-68)	TYPE (69-70)
FLOW	SAMPLE MEASUREMENT			GPD					0	N/A	CALC
SEE COVER LETTER	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT				8.4	9.6	11.4	- 0	0	1/7	GRAB
TEMPERATURE	PERMIT REQUIREMENT				N/A	N/A	n/a	C			
	SAMPLE MEASUREMENT				7.0	7.1	7.3	- Cu	0	1/7	GRAB
PH	PERMIT REQUIREMENT				6.0		9.0	SU			
OIL & GREASE	SAMPLE MEASUREMENT				<2.0	0.5	2.6		0	1/7	GRAB
OIL & GREASE	PERMIT REQUIREMENT				0.0	10.0	15.0	mg/L			
DUENOV C	SAMPLE MEASUREMENT			_	0.13	0.13	0.13	mg/L	0	1/30	GRAB
PHENOLS	PERMIT REQUIREMENT				0.0	0.5	0.7	11.9, 2			
	SAMPLE MEASUREMENT										
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R. D. Collins	THAT OUR BASED O PERSON SUBMET/ LAM ANK	VAIDER PEWALTY OF LAW THAT TO THE COTTON OF BUPERY/SECTION OR BUPERY/SECTION OF BUPERY/SECTION OF BUPERY/SECTION OF BUTER OF BUTER ARE SIGNATURE OF BUTER OF ANY BUTER OF BUTER OF BUTER OR BUTER OF BUTER OF BUTER OF BUTER OF BUTER OR BUTER OF BUTE	LY GATHER AND EVALUATE TO ON OR MERSONS WHO MAN FOR GATHERING THE 19FO DOWN EDGE AND BELLER, TRUING HEART PENALTES FOR SUB-	THE INFORMATION MAGE THE SYSTEM RNATION, THE IN- E. ACCUPATE AND MITTING FALSE IN	SLEVITTED. A OR THOSE FORMATION TO COMPLETE FORMATION			503 <sub>,</sub> 286–:	3681	06 (	02 02
TYPED OR PRINTED COMMENTS AND EXPLANATION OF				ly Include Brest up in	SIGN.	ATURE OF PRINCIPAL FICER OR AUTHORIZE	EXECUTIVE ED AGENT	AREA NUMB	ER	YEAR M	O DAY



#### CERTIFICATE OF ANALYSIS

CLIENT: Koppers Industries, Inc.

**PROJECT NAME: Stormwater Tanks** 

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

SUBMITTED: 01/03/06 16:15

REPORT DATE:	01/05/06 07:50	REPORT NUM	BER: 60103	t: 6010301 PAG			
CI SAMPLE	CLIENTS ID#		DATE TIME MATRIX				
6010301-01	Stormwater Tanks	01/02/2008			ater		
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME
6010301-01 General Bench A	SAMPLE ID: Storm	water Tanks					
O & G, TOTAL (HEM)	EPA 1664	TOTAL OIL AND GREASE	2.6	mg/L	2.0	JRW	01/04/2008 11:30
PHENOLS, TOTAL	EPA 420,1	TOTAL RECOVERABLE PHENOLICS	0.13	mg/L	0.050	MES	01/04/2008 16:16
Semi-Volatile Org	anics by Gas Chro	matography/Mass Spectroscopy					
PNAH 625	EPA 625 (SIM)	ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(a)PYRENE BENZO(b)FLUORANTHENE BENZO(b)FLUORANTHENE BENZO(k)FLUORANTHENE CHRYSENE DIBENZO(a,h)ANTHRACENE FLUORANTHENE FLUORENE INDENO(1,2,3-cd)PYRENE NAPHTHALENE PHENANTHRENE PYRENE	8.3 5.1 ND ND ND ND ND ND ND ND ND ND ND ND ND	UG/L UG/L UG/L UG/L UG/L UG/L UG/L UG/L	0.06 0.08 0.08 0.08 0.08 0.08 0.08 0.08	DM	01/04/2008 14:15
		Surrogate: 2-Fluoroblphenyl Surrogate: Nitrobenzene-D5	71.3 %	%RECOVERY			
		Surrogate: p-terphenyl-D14	57.0 % 88.0 %	%RECOVERY			

ORIGINAL

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Authorized for Release By:

Richard D. Reid - Laboratory Director

COLUMBIA INSPECTION, INC. 7133 N. Lombard, Portland, OR 97203 Phone:(503) 286-9464 Fax:(503) 286-5355 E-mail:lab@ColumbiaInspection.com

FROM : KOPPERS

FAX NO. :5032852831



Koppers Inc.

Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831

www.koppers.com

January 5, 2006

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of December 2005.

For the month, we had four regular discharges of our 220,000-gallon storage tanks, for a total discharge of 880,000 gallons. These discharges of the 220,000 gallons each were pumped on each of the following days in December: 21<sup>st</sup>, 22<sup>nd</sup>, 29th and 30<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: turnertj@koppers.com

Sincerely,

T. J. Turner General Foreman

CC: Mimplement enverentia	nd, Environmental Services
T. Self KI bovious etse	
(cath Witaszczyk, KI	
Approved:(initials/date)	
Copp:	
FILE Date:	

Environmental Dept. Document Control
Date Received: 110186
Logged: 1/10/04-A (Initials/date)
Approved:(initials/date)
File Date:

Koppers002973

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19) PERMITTEE NAME/ADDRESS (trouble Facility Named position if Different) Form Approved. OMB No. 2040-0004 Approval expires 05-31-98 NAME Koppers Industries, Inc. OR-000077-9 47430 001 ADDRESS 7540 NW Saint Helens Road PERMIT NUMBER DISCHARGE NUMBER Portland, OR. 97210-3663 101642 MONITORING PERIOD ☐ Check here if No Discharge MO DAY YEAR MO DAY FACILITY Northwest Terminal 12 LOCATION FROM 05 01 31 05 NOTE: Read Instructions before completing this form Multnomah County (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PARAMETER		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)		(4 Card Only) QUALITY OR CONCENTRATION (38 45) (48 53) (54 61)			NO.	FREQUENCY	SAMPLE		
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MLMIXAM	UNITS	(65-63)	ANALYSIS (54-68)	TYPE (69-70)
FLOW	SAMPLE MEASUREMENT			GPD					0	N/A	CALC.
SEE COVER LETTER	PERMIT REQUIREMENT										
	SAMPLE NEASUREMENT				6.8	8.4	10.1		0	1/7	GRAB
TEMPERATURE	PERMIT REQUIREMENT				N/A	N/A	N/A	°c			
	Sample Measurement				6.8	7.0	7.2	577	0	1/7	GRAB
PH	PERMIT REQUIREMENT				6.0		9.0	SU			
OTI COPACE	SAMPLE MEASUREMENT				<2.0	<2.0	<2.0	mg/L	0	1/7	GRAB
OIL & GREASE	PERMIT REQUIREMENT				0.0	10.0	15.0				
PHENOLS	SAMPLE MEASUREMENT				0.076	0.076	0.076	mg/L	0	1/30	GRAB
PREMICES	PERMIT REQUIREMENT				0.0	0.5	0.7	<del>.</del> 97 G			
	SAMPLE NEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	L				A.					
NAMETITLE PRINCIPAL EXECUTIVE OFFICER:  HOSPITANDER PENALTY OF LAW THAT THIS DOCUMENT AND ALLATACHMENTS WERE PREPARED.  UNDER MY DIRECTION OR SUPERANSON IN ACCORDING WITH A SYSTEM DESIGNED TO ASSURE  UNDER MY DIRECTION OR SUPERANSON IN ACCORDING WITH A SYSTEM DESIGNED TO ASSURE  HAT GUALINES PREPARED. WE ACCORDING THE PREPARED IN THE PREPARED WITH THE							DAT				
R. D. Collins	BASED PERSO SUBMIT LAW A INCLU	ON MY MOUSTY OF THE PERSONS IN THE PERSONS IN THE SERVICE OF MY KIND OF THE SERVICE SIGNAL THE PERSONS IN THE P	SOM OR PERSONS WHO MAN FOR GATHERING THE BIFO WOMLERSE AND BELIEF, TRU HOME PENALTIES FOR SUB JAID HIPPESONSE HT FOR H	MGE THE SYSTE FRACTION, THE IT E ACCUPATE AN AFTERNS FALSE IN MOVING VIOLATI	M, OR THOSE FORMATION D COMPLETE ONS. SEE 14			)3 <sub> </sub> 286–3	681	06 0	1 05
TYPED OR PRINTED	or cheed	rus: implement of bearing 6 s	walles under these statutes in portins and 3 years.)	ny include fices up t	OFF	ATURE OF PRINCIPAL I FICER OR AUTHORIZE	DAGENT AND	A HUMBI	R	YEAR MC	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

FAX NO. :5032852831

Dec. 07 2005 10:08AM P1

Tel 503 286 3681 Fax 503 285 2831

www.koppers.com



December 6, 2005

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of November 2005.

For the month, we had seven regular discharges of our 220,000-gallon storage tanks, for a total discharge of 1,540,000 gallons. These discharges of the 220,000 gallons were pumped on each of the following days in November: 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> 4<sup>th</sup>, 9<sup>th</sup>, 29th and 30<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: <a href="mailto:turncrtj@koppers.com">turncrtj@koppers.com</a>

Sincerely,

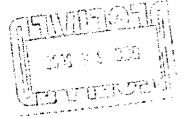
7. J. Turner General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KI

A. Witaszczyk, KI

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Environmental Dept. Document Control				
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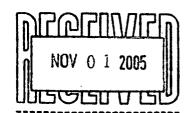
NATIONAL POLITIANT DISCHARGE FILIBRATION SYSTEM INCOESS PERMITTEE NAME/ADDRESS (Include Facility Name) ocation if Offerents Form Approved. OMB No. 2040-0004 DISCHARGE MONITORING REPORT (DMR) Koppers Industries, Inc. (2-16) Approval expires 05-31-98 OR-000077-9 001 47430 ADDRESS 7540 NW Saint Helens Road PERMIT NUMBER DECHARGE NUMBER Portland, OR. 97210-3663 101642 MONITORING PERIOD Dicheck here if No Discharge YEAR MO DAY YEAR MO DAY **FACILITY** Northwest Terminal FROM 05 II 01 TO 05 II 30 LOCATION NOTE: Read instructions before completing this form Multnomah County (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) QUANTITY OR LOADING QUALITY OR CONCENTRATION (3 Cent Onty) /4 Card Only PREQUENCY NO. PARAMETER SAMPLE (46-53) (54-61) (38-45) (46-53) (54-61) OF TYPE (32-37) ANALYSIS MINIMEIM AVERAGE R82-63) AVERAGE MAXIMUM UNITS MAXIMUM UNITS (S4-68) (69.70) SAMPLE FLOW CALC 0 N/A MEASUREMENT CPD SEE COVER LETTER PERMIT RECURRENENT SAMPLE 11.4 14.9 7.0 O 1/7 GRAB MEASUREMENT 0 TEMPERATURE PERMIT C N/A N/A N/A REQUIREMENT SAMPLE 7.2 6.9 7.6 MEASUREMENT 0 1/7 **GRAB** SII PH PERMIT REQUIREMENT 6.0 9.0 SAMPLE <2.0 <2.0 <2.0 0 MEASUREMENT 1/7 GRAB OIL & GREASE mg/L PERMIT 0.0 REQUIREMENT 10.0 15.0 SAMPLE <0.05 < 0.05 <0.05 MEASUREMENT n 1/20 CDAB mq/L PHENOLS PERMIT 0.0 0.5 0.7REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE NEASUREMENT PERMIT REQUIREMENT CERTISTY UNDER PREMIUTY OF LAWY THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREMIURED UNDER MY DIRECTION OR SUPER-PRISON IN ACCORDANCE WITH A SYSTEM DESCRIPE TO ASSURE THAT CALL ASSURE PROPOSED AND CALLED THE PROPOSED KINDS ASSURE THAT CALLED PROPOSED AND ASSURE THAT CALLED PROPOSED AND ASSURE THAT CALLED PROPOSED AND ASSURE THAT STREET, ARE PROPOSED ASSURED AND ASSURED THE BEFORMATION. THE REPORTMENTOR ALBERTITED AS TO THE BEST OF MY WOOMEDIC AND BELLET. THE ACCURACY, AND COMPLETE AND ASSURED THAT THESE ARE SUGGESTANT PRIMATED FOR SUBMITTING FALSE NORTH MY WOOMEDIC AND BELLET. THAT ADMITTING FALSE NORTH PRIMATED FOR SUBMITTING FALSE NORTHWIND WOOLATIONS. SEE 16 USE. 6 YOUR AND STATES OF 1919. PREMISED WHEN THE WAS THE WOOD AS TO STATE AND THE PROPOSED AS THE MY DISTRIBUTIONS. SEE 16 USE. 6 YOUR AND STATES OF 1919. PREMISE WHAT DESCRIPE WAS THE WAS THE WOOD AS TO STATE AND THE PROPOSED AS THE PROPOSED WAS THE WAS THE WAS THE WOOD AS THE PROPOSED AS THE PROPOSED WAS THE WAS TH NAME/TITLE PRINCIPAL EXECUTIVE OFFICER TELEPHONE DATE TJ. Turner 503, 286-3681 05 12. 06 R. D. Collins SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT TYPED OR PRINTED NUMBER YEAR MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference sil attachments here)

CC: M. Pronold, City of Portland; T. Self, KI; A. Witaszczyk

EROM : KOPPERS

FAX NO. :5032852831





Koppers Inc.

Carbon Materials and Chemicals

7540 NW Saint Helens Road Portland, OR 97210-3663 Tel 503 286 3681 Fax 503 285 2831 www.koppers.com

November 1, 2005

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of October 2005, including the 4th quarter PAH test results.

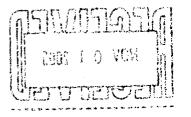
For the month, we had one regular discharge of our 220,000-gallon storage tanks. The one discharge of the 220,000 gallons was pumped on October 5<sup>th</sup>. There were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: turnerti@koppers.com

Sincerely,

General Foreman

CC::M::Pronold::@ity'6f	Port	and, Environmental Services
T. Self, KIII POR BURG		
M. Cilley, KII		
Asperved.		
Coppi		
Pile Date:		



Environmental D	Dept. Document Control
Date Received:	111105 11105 A(Anitials/date)
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FROM

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PERMITTEE NAME	NAME/ADDRESS (Ind Koppers Indus	une Facily NameLood Stries, Inc	lion # Different)	NATIONAL PO DISCH	ALUTANT DISCH TARGE MON (2-16)	HARGE ERMINATION SY.	STEM (MPDES) (DMR) (17-19)			Form Ar OMB N	oproved. b. 2040-000	4 L31-98
ADDRESS 7540 NW Saint Helens Road		ad				47430 Approval expires 05-31-						
	Portland, OR.	97210-366	53	PERM	IIT NUMBER		ARGE NUMBER	101642				
FACILITY	Northwest Ter	minal		YEAR		TORING PERIOD YEAR		Check here if h	No Discharge			
LOCATION	Multnomah Cou			FROM US	10 0	1 to <u>05</u>	10 31	NOTE: Read Ins	tructions befor	e comp	leting this fo	etri).
			100.00		(22-23) (24-		28-29) (30-31)	NAME OF TAXABLE				<del></del>
F	PARAMETER (32-37)		(3 Cerd Only) QU (46-53)	ANTITY OR LOADS (54-61)	<b>V</b> G	(4 Card Only) OL (38-45)	JALITY OR CONCE (48-53)	(54-81)		NO.	FREQUENCY OF ANALYSIS	BAMPLE TYPE
			AVERAGE	MAXIMUM	UNITS	MUNRAUM	AVERAGE	MAXIMUM	UNITS	(62-63)	(64-68)	(69-70)
FLO	XI .	SAMPLE MEASUREMENT			GPD					0	N/A	CALC.
SEE CO	VER LETTER	PERMIT REQUIREMENT										
		SAMPLE MEASUREMENT				14.6	15.7	16.8		0	1/7	GRAB
TEM	PERATURE	PERMIT REQUIREMENT	<del> </del>			N/A	N/A	N/A	°c			
		SAMPLE MEASUREMENT				6.8	7.1	7.3		0	1/7	GRAB
PH	,	PERMIT REQUIREMENT				6.0		9.0	SU			•
		SAMPLE MEASUREMENT				<0.0	<0.0	<0.0		0	1/7	GRAB
011	& GREASE	PERMIT REQUIREMENT				0.0	10.0	15.0	mg/L			
<b>2011</b>	NOLS	SAMPLE MEASUREMENT		(		0.07	0.07	0.07	mg/L	0	1/30	GRAB
FOE		PERMIT REQUIREMENT				0.0	0.5	0.7		<u></u>		
!		SAMPLE MEASUREMENT										
		PERMIT REQUIREMENT										
		SAMPLE MEASUREMENT				-						
		PERMIT REQUIREMENT				·			7			
NAME/TITLE	PRINCIPAL EXECUTIVE	OFFICER LOSING	YUNDER PEWLTY OF LIGHTH MY DIRECTION ON A SECENCE	AT THE DOCUMENT AND ALL A	TOWNER TO WER	E PREPARED	All		TELEPHO	ΥE	ÐA	TE
ה מ	Collins	THAT OF BASED PERSON SUBMIT JAMAN	Y LADER PEWLY OF LIMIN IN MY DIRECTION OR BIPERNYS MULTICO PERSONNEL PROPE ON IN PROPE ON IN PROPE OF THE PERSONNEL PROPE OF THE PERSONNEL PROPERTY PERSONNEL PROPERTY OF FAMILY	RLY GRIVER AND EVALUATE SON OR PERSONS WHO MAN FOR GATHERING THE INFO MOMLEDOS AND BELLEF, TRU FICANT PENALTEE FOR SUB-	THE INFORMATION MAGE THE BYSISS RMATION, THE IN E. ACCURATE AND SITTING FALSE IN	SUBMETTED A A, OR THOSE FORMATION TOOMPLETE FORMATION	J. Turner	ier	503, 286-	3681	05	11 01
	TYPED OR PRINTED	U.S.C. 4	ING THE POSSESTITY OF FINE 1801 AND 33 U.S.C. § 1319. (P numbrighterward of between Be	E AND INFRISONNE NI FOR K medies under those stellung in- northe and 5 years.)	OVORTING VICEAT IN By Industri Bries up 9	SIGN	ATURE OF PRINCIPAL FICER OR AUTHORIZE		AREA NUM	BED	YEAR M	O DAY
	AND EXPLANATION OF								CODE I HUM	JER .	(ENK) M	UAT

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## CERTIFICATE OF ANALYSIS

CLIENT: Koppers Industries, Inc.

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

**PROJECT NAME: Stormwater Tanks** 

SUBMITTED: 10/03/05 12:57

REPORT DATE:	10/11/05 10:56	REPORT NUM	BER: 510031	10			PAGE: 1 OF 1
CI SAMPLE	CLIENTS ID#		DAT	E TIME M	ATRIX		
5100310-01	Stormwater Tanka		10/0	3/2005 1257 W	ater	<del></del> -	
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION	TECH	DATE/TIME
5100310-01 Gèneral Bench A	SAMPLE ID: Storm	water Tanks					
O & G, TOTAL (HEM)	EPA 1884	TOTAL OIL AND GREASE	ND	mg/L	2.0	DR	10/04/2005 17:01
PHENOLS, TOTAL	EPA 420.1	TOTAL RECOVERABLE PHENOLICS	0.069	mg/L	0.050	MES	10/04/2005 15:57
Semi-Volatile Orc	anics by Gas Chro	matography/Mass Spectroscopy					
PNAH 625	EPA 625 (SIM)	ACENAPHTHENE ACENAPHTHYLENE ANTHRACENE BENZO(a)ANTHRACENE BENZO(a)PYRENE BENZO(b)FLUORANTHENE BENZO(b)FLUORANTHENE BENZO(k)FLUORANTHENE CHRYSENE DIBENZO(a,h)ANTHRACIENE FLUORANTHENE FLUORANTHENE FLUORENE INDENO(1,2,3-cd)PYRENE NAPHTHALENE	0.1 0.2 0.4 1.2 2.5 2.7 3.3 2.5 1.9 0.8 2.2 0.07 2.8	սց/Լ ւսց/Լ ւսց/L ւսց/L ւսց/L ւսց/L ւսց/L ւսց/L ւսց/L ւսց/L ւսց/L ւսց/L ւսց/L	0.06 0.06 0.08 0.08 0.06 0.06 0.06 0.06	DM	10/04/2005 15:33
		PHENANTHRENE PYRENE Surrogate: 2-Fluoroblphenyl Surrogate: Nitrobenzene-D5	0.8 2.0 96.8 % 84.2 %	vg/L ug/L %RECOVERY %RECOVERY	0.08 0.08 50-150 50-150		
		Surrogate: p-terphenyl-D14	82.1 %	%RECOVERY	50-150		

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Authorized for Release By:

Richard D. Reid - Laboratory Director

**ORIGINAL** 

COLUMBIA INSPECTION, INC.

7133 N. Lombard, Portland, CR 97203 Phone:(503) 286-9464 Fax:(503) 286-5355 E-mail:lab@Columbiatnspection.com



Water Pollution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

October 3, 2005

Koppers Industries, Inc. Amos Karnerer 7540 NW St. Helen's Rd. Portland, OR 97210

Re: Stormwater discharge to City of Portland sewer system.

### Dear Mr. Kamerer:

In response to your request for stormwater discharge to the City sewer system dated September 28, 2005; the city has discharge limits that will need to be met before discharge can be allowed. The following is the current local limitations in effect at this time.

Pollutant Name <u>METALS</u>	Local Limit Daily Max (mg/C)	10/26/05 EAMPLE TEST Results
Arsenic	0.2	ND
Cadmium	0.7	ND
Chromium	5.0	A/D
Copper	3.7	1.0
Lend	0.7	0.03
Mercury	0.010	0,000 11
Molybdenum	1.4	NO
Nickel	2.8	140
Selenium	016	NO
Silver	0.4	ND
Zine	31	0.39
NONEMERALSTINORG	<u>ASIOS</u>	
Cyanide	44.12	* <b>/</b> \/O
р <b>Н</b>	5.0-11.5 su	
Sulfide	4.0	ND
200		

1,2-Dichlorgethane	0.50	NO
2,4-Dinitrotoluene	0.13	NO
Acrylonitrile	1.00	NO
Chlordane	0.03	110
Chlurobenzene	0.20	NO
Chloroform	0.20	NO
Nitrobenzene	2.00	NO
Pentachlorophenol	0.04	NO
Trichloroethylene	0.20	ND
Non-polar Oil & Grease	110	MO

Sampling listed in your submittal indicated high readings for Selenium; 6.9 mg/l and for Zinc, 6.3 mg/l. Benzene at 29 mg/l would also be a concern. If you want to consider pretreating the discharge to local limitations you may apply for a permit at any time. I am also enclosing a copy of the City Code which includes the local limits for your review.

If you have comments or questions as you read through the materials, please do not hesitate to contact me at 823-7230.

Respectfully,

Ann O'Roke, Permit Manager Industrial Source Control Division

Cc: Industry File



CLIENT: Koppers Industries, Inc.

ATTN: T.J. Turner

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 286-3681 FAX: (503) 285-2831 PROJECT NAME: Boiler Blowdown Water Test

SUBMITTED: 10/26/05 12:05

					**************************************		
CI SAMPLE	CLIENTS ID#		DATI		MATRIX	_	
6102004-01	Boiler Blowdown Grat	) Sample	10/2	8/2005 1000	Water		
BAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME
6102604-01	SAMPLE ID: Boile	r Blowdown Grab Sample					
General Bench A	Analysis	·		*			
CYANIDE, TOTAL	SM 4800-CN-B-C	CYANIDE	ND	mg/L	0.0030	MES	11/03/2005 10:11
O & G, NP (SGT-HEM)	EPA 1684	NONPOLAR OIL & GREASE	ND	rhg/L	2	JRW	11/07/2006 15:12
SULFIDE	EPA 376.1	SULFIDE	ND	mg/L	1,0	MES	11/01/2005 15:58
Fotal Mercury by	Cold Vapor Atomi	c Fluorescence					YYAY Black-dodress-annia
MERCURY CV AF	EPA 245.7/1631	MERCURY	0.00011	mg/L	0.000050	KĖL	11/03/2005 12:24
		** ** * ****	0.00011	- mg/L	0.000000	NEL	1100/2000 12.24
•	nductively Coupled						4010000000 44.65
ARSENIC - ICP	EPA 200,7/80108	ARSENIC	ND	mg/L	0.010	KEL	10/27/2005 14:08
CADMIUM - ICP		CADMIUM	ND	mg/L	0.003	KEL	10/27/2005 14:08
CHROMIUM - ICP	141 g 148 g 141 g	CHROMIUM	ND	mg/L	0.005	KEL	10/27/2005 14:08
COPPER - ICP		COPPER	1.0	mg/L	0.006	KEL	10/27/2005 15:58
LEAD - ICP		LEAD	0.030	mg/L	0.005	KEL	10/27/2005 14:08
MOLYBDENUM - ICF	>	MOLYBDENUM	ND	mg/L	0.005	KEL	10/27/2005 15:58
NICKEL - ICP		NICKEL	ND	mg/l.	0.020	KEL	10/27/2005 15:58
SELENIUM - ICP		SELENIUM	ND	mg/L	0.10	KEL	10/27/2005 14:08
SILVER - ICP		SILVER	ND	mg/L	0.010	KEL	10/27/2005 15:36
ZINC - ICP		ZINC	0.39	mo/L	0.003	KEL	10/27/2005 15:58
	hu Cae Chromote	graphy/Mass Spectroscopy					
VOC 624 Extended	EPA 624	ACROLEIN	ND	mg/L	0.100	JRW	11/04/2005 10:48
VOC 024 EXIBRUBU	EFA 024	ACRYLONITRILE	ND	mg/L mg/L	0.0100	ALCAA	17/04/2000 10.46
		BENZENE	ND	mg/L	0.0005		
		BROMOCHLOROMETHANE	ND	mg/L	0.0005		
		BROMODICHLOROMETHANE	ND	mg/L	0.0005		
		BROMOFORM	ND	mg/L	0.0006		
		CARBON TETRACHLORIDE	MD	mg/L	0.0006		
		CHLOROBENZENE	ND	mg/L	0.0006		
		CHLORODIBROMOMETHANE	ND	mg/L	0.0005	•	
		CHLOROETHANE	ND	mg/L	0.0005	-	<b>***</b>
		2-CHLOROETHYL VINYL ETHER	ND	mg/L	0.0005		UICIAIAI
		tert-BUTYLBENZENE	ND	mg/L	0.0005	UI	PIGINAL
		CHLOROFORM	ND	mg/L	0.0005	• ,	" W!! W 14
		CHLOROMETHANE	ND	mg/L	0.0005		
		1,2-DIGHLOROBENZENE	ND	mg/L	0.0005		
		1,3-DICHLOROBENZENE	ND	mg/L	0.0005		
		1,4-DICHLOROBENZENE	ND	mg/L	0.0005		
		1,1-DICHLOROETHANE	ND ND	mg/L	0.0005		
		1,2-DICHLOROETHANE 1,1-DICHLOROETHYLENE	ND ND	mg/L	0.0005 0.0005		
		1,1-DICHLOROPROPANE	ND ND	mg/L mg/L	0.0005		
		TRANS-1,3-DICHLOROPROPENE	ND ND	mg/L mg/L	0.0005		
		CIS-1,3-DICHLOROPROPENE	ND ND	mg/L	0.0005		•

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Authorized for Release By:

David J. Melander For Richard D. Reld - Laborator

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail:lab@ColumbiaInspection.com



REPORT DATE:	11/08/05 16:23	REPORT NUMB	ER: 510260	<u> </u>			PAGE: 2 OF
SAMPLE/ ANALYSIS	METHOD	PARAMETER	RESULTS	UNITS	DETECTION	TECH	DATESTIME
5102604-01	SAMPLE ID: Boller	Biowdown Grab Sample	•				
/olatile Organics	by Gas Chromatog	raphy/Mass Spectroscopy					40.40
OC 624 Extended	EPA 624	TRANS-1,2-DICHLOROETHENE	ND	mg/L	0.0005	JRW	11/04/2005 10:48
VOC 624 EXMINUSU	EFA 024	CIS-1,2-DICHLOROETHENE	ND	mg/L	0.0005		
		ETHYLBENZENE	ND	mg/L	0.0005		
		METHYL BROMIDE	ND	rng/L	0.0005		
		METHYL CHLORIDE	ND	mg/L	0.0005		
		METHYLENE CHLORIDE	ND	mg/L	0.0005		
		METHYL-TERT-BUTYL ETHER (MTBE)	ND	mg/L	0,0005		
		NAPHTHALENE	ND	mg/L	0,0005		
		STYRENE	ND	mg/L	0.0005		
		1.1,2,2-TETRACHLOROI:THANE	ND	mg/L	0,0005		
		TETRACHLOROETHENE	ND	mg/L	0.0005		
		TOLUENE	ND	mg/L	0.0005		
		1,1,1-TRICHLOROETHANE	ND	mg/L	0.0005		
		1,1,2-TRICHLOROETHANE	ND	mg/L	0.0005		
		TRICHLOROETHYLENE	ND	mg/L	0,0005		
		TRICHLOROFLUORMETHANE	ND	mg/L	0.0005		
			ND	mg/L	0.0005		
		VINYL CHLORIDE	ND	mg/L	0,0005		
		DIBROMOMETHANE	ND	mg/L	0.0005		
		1,2-DIBROMOETHANE		-	0.0005		
		1,1,1,2-TETRACHLOROETHANE	ND	mg/L	0.0005		
		M- & P-XYLENE	ND	mg/L	0.0005		
		O-XYLENE	ND	mg/L			
		1,2,3-TRICHLOROPROPANE	ND	mg/L.	0.0005		
		1,2-DIBROMO-3-CHLOROPROPANE	ND	mg/L	0.0006		
		Surrogate: Dibromofluoromethane	95.5 %	%RECOVERY	50-160		
		Surrogate: Fluorobenzenn	70.9 %	%RECOVERY	50-150		
		Surrogate; Chlorobenzenii-d5	151 %	%RECOVERY	50-150		
		Surrogate: 1,4-Dichlorobenzene-d4	89.1.%	%RECOVERY	50-150		
Semi-Volatile Or	ganics by Gas Chr	omatography/Mass Spectroscopy					
ACID SEMIVOLS 626	-	PENTACHLOROPHENOL	NĎ	mg/L	0.0200	DM	10/27/2005 23:53
7(4)2 02/11/10/20 02/	• 1.71-10	Surrogate: Phenol-d6	32.1 %	%RECOVERY	20-160		
		Surrogate: 2,4,6-Tribromophenol	102 %	<b>%RECOVERY</b>			
B/N SEMIVOL 625		ACENAPHTHENE	ND	mg/L	0.00400	DM	10/27/2005 23:53
DVA OCIANAOF 050		ACENAPHTHYLENE	ND	mg/L	0.00400		, , , , , , , , , , , , , , , , , , , ,
		a-TERPINEOL	ND	mg/l.	0.00400		
		ANTHRACENE	ND	mg/L	0.00400		
		BENZIDINE	ND	mg/L	0.00800		
			ND	mg/L	0.00400		
		BENZO(a)ANTHRACENE	ND	mg/L	0.00400		
		BENZO(a)PYRENE	ND		0.00400		
		BENZO(K)FLUORANTHENE		rng/L			
	•	BENZO(g,h,l)PERYLENE	ND	mg/L	0.00400		
	BENZO(b)FLUORANTHENE	ND	mg/L	0.00400			
		BIS(2-CHLOROETHOXY)METHANE	ND	mg/L	0.00400		
		BIS(2-CHLOROETHYL)ETHER	ND	mg/L	0.00400		
		BIS(2-CHLOROISOPROFYL)ETHER	ND	mg/L	0.00400		
		BIS(2-ETHYLHEXYL)PHTHALATE	ND	mg/L	0.00400		
		BUTYL BENZYL PHTHALATE	ND	mg/L	0.00400		
		4-BROMOPHENYL PHENYL ETHER	ND	mg/L	0,00400		
		CARBAZOLE	ND	mg/L	0.00400		
		2-CHLORONAPHTHALENE	ND	mg/L	0.00400		
		4-CHLOROPHENYL PHENYL ETHER	ND	mg/L	0.00400		
		CHRYSENE	ND	mg/L	0.00400		
					0.00400		
		N-DECANE	ND	rng/L	0.00400		
		N-DECANE DIBENZO(a,h)ANTHRACIENE	ND ND	mg/L mg/L	0.00400		

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Authorized for Release By:David J. Melander For Richard D. Reid -

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, CR 97203 Phone: (503) 286-9464 Fax: (503) 286-5355 E-mail: lab@ColumbiaInspection.com



REPORT DATE	: 11/08/05 16:23	REPORT NUMI	BER: 510260	)4			PAGE: 3 OF
SAMPLE/ ANALYSIS	METHOD	PARAMETER	REBULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME
102604-01		r Blowdown Grab Sample					
iemi-Volatile O	rganics by Gas Chr	omatography/Mass Spectroscopy					
/N SEMIVOL 625	EPA 625	1,2-DICHLOROBENZENE	ND	mg/L	0.00400	DM	10/27/2005 28:53
		1,3-DICHLOROBENZENI:	ND	mg/L	0.00400		
		1,4-DICHLOROBENZENI:	ND	mg/L	0.00400		
		DIETHYL PHTHALATE	ND	mg/L	0.00400		
		DIMETHYL PHTHALATE	ND	mg/L	0.00400		
		DI-N-BUTYL PHTHALATIE	ND	mg/L	0.00400		
		DI-N-OCTYL PHTHALATIE	ND	mg/L	0.00400		
		2,4-DINITROTOLUENE	ND	mg/L	0.00800		
		1,2-DIPHENYLHYDRAZINE (88 AZOBENZENE)	ND	mg/L	0.00400		
		2,6-DINITROTOLUENE	ND	mg/L	0.00800		
		FLUORANTHENE	ND	mg/L	0.00400		
		FLUORENE	ND	mg/L	0.00400		
		HEXACHLOROBENZENE	ND	mg/L	0.00400		
		HEXACHLOROBUTADIENE	ND	mg/L	0.00400		
		HEXACHLOROCYCLOPENTADIENE	ND	mg/L	0.0200		
		HEXACHLOROETHANE	ND	mg/L	0.00400		
		INDENO(1,2,3-cd)PYRENE	ND	mg/L	0.00400		
		ISOPHORONE	ND	mg/L	0.00400		
		NAPHTHALENE	ND	mg/L	0.00400		
		NITROBENZENE	ND	rng/L	0.00400		
		N-NITROSODIMETHYLAMINE	ND	mg/L	0.00400		
		N-NITROSODIPHENYLAMINE	ND	mg/L	0.00400		
		N-NITROSO-DI-N-PROPYLAMINE	ND	mg/L	0.00400		
		N-OCTADECANE	ND	mg/L	0.00400		
		PHENANTHRENE	ND	mg/L	0.00400		
		PYRENE	ND	rng/L	0.00400		
		1,2,4-TRICHLOROBENZENE	ND	mg/L	0.00400		
		Surrogate: 2-Fluorobiphenyl	87.1 %	%RECOVERY	50-150		
		Surrogate: Nitrobenzene-D5	85.1 %	%RECOVERY	50-150		
		Surrogate: p-terphenyl-D14	99.4 %	%RECOVERY	50-150		
emi-Volatile C	rganics by Gas Chi	romatography/ECD					
ESTICIDES 025	EPA 625	ALDRIN	ND .	mg/L	0.00267	DM	10/27/2005 23:53
CONTONDED VED	2,7020	ALPHA-BHC	ND	mg/L	0.00133		
		BETA-BHC	ND	mg/L	0.00267		
		GAMMA-BHC (LINDANE)	. ND	mg/L	0.00133		
		DELTA-BHC	ND	mg/L	0.00287		
		4,4-DDD	ND	mg/L	0.00533		
		4.4-DDE	ND:	mg/L	0.00287		
•		CHLORDANE	ND	mg/L	0.00287		
		4,4-DDT	ND	mg/L	0.00533		
		DIELDRIN	ND	mg/L	0.00267		
		ENDOSULFAN I	ND	mg/L	0.00287		
		ENDOSULFAN II	ND	mg/L	0.00533		
·	ENDOSULFAN SULFATE	ND	mg/L	0.00533			
		ENDRIN	ND	mg/L	0.00267		
		ENDRIN ALDEHYDE	ND	mg/L	0.00887		
		ENDRIN KETONE	ND	mg/L	0.00887		
		HEPTACHLOR	ND	mg/L	0.00287		
		HEPTACHLOR EPOXIDE	ND	mg/L	0.00267		
	•	ALPHA-CHLORDANE	ND	ng/L	0.00267		
		METHOXYCHLOR	ND	mg/L	0.00207		
		GAMMA-CHLORDANE	ND	-	0.00287		
				mg/L			
		TOXAPHENE	ND	mg/L	0.0533		

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Authorized for Release By:David J. Melander For Richard D. Reid -

COLUMBIA INSPECTION, INC 7133 N. Lombard, Portland, OR 97203 Phone:(503) 286-9464 Fax:(503) 286-5355 E-mail:lab@ColumbiaInspection.com

Nee 29/28/05

FAX NO. :5032852831



Water Follution Control Laboratory 6543 N. Burlington Ave., Portland, Oregon 97203-5452 (503) 823-5600

File 7 th

October 3, 2005

Koppers Industries, Inc. Amos Kamerer 7540 NW St. Helen's Rd. Portland, OR 97210

Re: Stormwater discharge to City of Portland sewer system.

Dear Mr. Kamerer:

In response to your request for stormwater discharge to the City sewer system dated September 28, 2005; the city has discharge limits that will need to be met before discharge can be allowed. The following is the current local limitations in effect at this time.

Pollutant	Local
Name	Limit Daily
	, · · · · · · · · · · · · · · · · · · ·
N. C. C. C. C. C. C. C. C. C. C. C. C. C.	(mg/L)
<u>METALS</u>	
Arsenic	0.32
Cadmium	0.7
Chromium	5.0
contact the property of the first transfer of the second o	And the first of t
enter transport de l'antitrat de la company de la company de la company de la company de la company de la comp	3.7
Copper Lead	3.7 0.7
Copper	CONTRACTOR DECEMBER OF CONTRACTOR AND AND AND AND AND AND AND AND AND AND
Copper Lead	0.7
Copper Lead Mercury	0.7 0.010 1.4 2.8
Copper Lead Mercury Molybdenum Nickel Selenium	0.7 0.010 1.4
Copper Lead Mercury Molybdenum Nickel	0.7 0.010 1.4 2.8

NON-METALS (INORGAN	ICS)
REPORT OF THE PROPERTY OF THE	
Cyanide	**************************************
TT	
pH ,	5.0-11.5 su
Sulfide	4.()
OF STATE AND ADDRESS OF THE STATE OF THE STA	NATIONAL PROPERTY OF THE PROPE
North Control of the	

#### NON-METALS (ORGANICS)

1,2-Dichloroethane	0,50
2,4-Dinitrotoluene	0.13
Acrylonitrile	1.00
Chlordane	0.03
Chlorobenzene	0,20
Chloroform	0.20
Nitropenzene	2.00
Pantachlorophenol	0,04
Trickloroethylene	'
Non-polar Oil & Grease	110

Sampling listed in your submittal indicated high readings for Selenium; 6.9 mg/l and for Zinc, 6.3 mg/l. Benzene at 29 mg/l would also be a concern. If you want to consider pretreating the discharge to local limitations you may apply for a permit at any time. I am also enclosing a copy of the City Code which includes the local limits for your review.

If you have comments or questions as you read through the materials, please do not hesitate to contact me at 823-7230.

Respectfully,

Ann O'Roke, Permit Manager Industrial Source Control Division

and ORake

Cc: Industry File

10/7/05-

L. Hyde GAX

T. J. TURNER



Koppers inc.

www.koppers.com

Carbon Materials and Chemicals

7540 NW Saint Helens Road Portland, OR 97210-3663 Tel 503 286 3681 Fax 503 285 2831

May 2, 2005

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of April 2005, including the second quarter PNAH test results.

During the month, we had one regular discharge of our 220,000-gallon storage tanks. There was one "slug" discharge of the 220,000 gallons, which was pumped over two days April 15<sup>th</sup> and 16th. There were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: <a href="mailto:turnerti@koppers.com">turnerti@koppers.com</a>

Sincerely,

T. Turner

General Foreman

CC: M. Pronold, City of Portland, Environmental-Services

T. Self, KII

B. Bauman, KII

Self with the self with the

Envir I	onment Jocume	al Departi nt Control	ment
Date Received Logged: Exceptions: Approved: Distribution:			(initials/date) (initials/date) Patrick Linda
Copy to:	Dat	le:	

Koppers002991

FACILITY

LOCATION

Northwest Terminal

Multromah County

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) CC: M. Pronold, City of Portland; T. Self, KII; B. Bauman, KII PAGE 1 OF 1 EPA Form 3320-1 (10-96) (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Offerent) NATIONAL POLI LITANT DISCHARGE ELIMINATION SYSTEM INPOESI DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19) NAME Koppers Industries, Inc. ADDRESS 08-000077-9 7540 NW Saint Helens Road PERMIT NUMBER Portland, OR. 97210-3663

DESCHARGE NUMBER MONITORING PERIOD

YEAR MO DAY

YEAR MO DAY

47430 101642

☐ Check here if No Discharge

NOTE: Read instructions before completing this form

Form Approved.
OMB No. 2040-0004
Approvel expires 05-31-98

			(22-23) (24-		8-29) (30-31)					
	(3 Card Only) QU/ (46-53)				NO.	PRECLIENCY OF	SAMPLE TYPE			
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	(82-63)	(64-68)	(69-70)
SAMPLE MEASUREMENT			GPD					0	N/A	CALC
PERMIT REQUIREMENT			1				]			
SAMPLE MEASUREMENT				11.0	11.1	11.1		0	1/7	GRAB
PERMIT REQUIREMENT				N/A	N/A	N/A	C			
SAMPLE MEASUREMENT				6.8	6.9	6.9	- C.1	0	1/7	GRAB
PERMIT REQUIREMENT				6.0		9.0	50			•
SAMPLE MEASUREMENT				<2.0	<2.0	<2.0		0	1/7	GRAB
PERMIT REQUIREMENT			i	0.0	10.0	15.0	mg/L			
SAMPLE MEASUREMENT		1		<0.05	<0.05	<0.05	mc/L	0	1/30	GRAE
PERMIT REQUIREMENT				0.0	0.5 ·	0.7	,			<u> </u>
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										<u>.</u>
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT			]		. :					
OFFICER ICERTIFY	UNDER PENALTY OF LAW THA	THIS DOCUMENT AND ALLA	TEACHANENTS WES	EXEMSED (1)	AM		TELEPHO	NE		DATE
THAT QUA BASED OF PERSONS SUBNETTE I AM AWA	LIFED PERSONNEL PROPER WAY INCLIFY OF THE PERS 3 DIRECTLY PERSONNENSEE LO IS, TO THE BEST OF MY KIN PE THAT THERE ARE SIGNIF	LYGATHER MID EMILIATE ON OR PERSONS WHO MAI FOR GATHERING THE INFO DMLEDGE AND BELLEF, TRU ICANT PENALTES FOR SUR ICANT PENALTES FOR SUR	THE MFORMATION WAGE THE SYSTE PRIMATION, THE R IE ACCURATE AM MITTING FALSE IN	M. OR THOSE TO COMPLETE COMPLETE			<del>50</del> 3 <sub>1</sub> 286-	-368]	05	05 0
INCLUDIN U.S.C. § 10 or meading	IS THE POBSELUTY OF FINE 001 AND 33 U.B.C. § 1319, 124 In Imprisonment of Palameen 6 In	AND IMPROPRIENT FOR It traffes under these staking m confes and 5 years.)	INONING VICLATI	ONS. BEE 18 to \$10,000 and SIGN OF	ATURE OF PRINCIPAL FICER OR AUTHORIZ	EXECUTIVE ED AGENT	AREA NUM	BER	YEAR	MO D
	MEASUREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT	SAMPLE MEASUREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  PERMIT	AVERAGE MAXIMUM  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT	AVERAGE MAXIMUM UNITS  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  SAMPLE MEASUREMENT  PERMIT  PERMIT  PERMIT  REQUIREMENT  SAMPLE MEASUREMENT  PERMIT  REQUIREMENT  PERMIT  PERMIT  REQUIREMENT  DEFICER  ICENTRY UNDER FOUNTY OF LAW THAT THIS DOCUMENT AND ALL TO COMPUTS WE'RE  INVICULIABLE OF RESOURCE IN PROPERTY GOTHER AND EMALLATE OF RESOURCE IN THE AND EMALLATE OF RESOURCE IN THE STATE OF RESOURCE IN THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION THE STATE OF RESOURCE IN THE NOTIFICATION OF RESOURCE	AVERAGE MAXIMUM UNITS MINIMUM  SAMPLE MEASUREMENT  PERMIT RECURREMENT  SAMPLE MEASUREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  PERMIT REQUIREMENT  DEFINIT  REQUIREMENT  SAMPLE MEASUREMENT  PERMIT  REQUIREMENT  O.O  CO  SAMPLE MEASUREMENT  PERMIT  PERMIT  PERMIT  REQUIREMENT  O.O  SAMPLE MEASUREMENT  O.O  SAMPLE MEASUREMENT  PERMIT  REQUIREMENT  PERMIT  REQUIREMENT  PERMIT  REQUIREMENT  PERMIT  REQUIREMENT  PERMIT  REQUIREMENT  PERMIT  REQUIREMENT  SAMPLE MEASUREMENT  PERMIT  REQUIREMENT  PERMIT  REQUIREMENT  SAMPLE MEASUREMENT  PERMIT  REQUIREMENT  SAMPLE MEASUREMENT  PERMIT  REQUIREMENT  SAMPLE MEASUREMENT  PERMIT  REQUIREMENT  SAMPLE MEASUREMENT  PERMIT  REQUIREMENT  SAMPLE MEASUREMENT  PERMIT  REQUIREMENT  SAMPLE MEASUREMENT  SAM	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE  SAMPLE MEASUREMENT  PERMIT PERMIT PERMIT N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	AVERAGE MAXIMUM UNITS MINIMUM AVERAGE MAXIMUM  SAMPLE MEASUREMENT  REQUIREMENT  REQ	AVERAGE   MAXIMUM   UNITS   MINIMUM   AVERAGE   MAXIMUM   UNITS	AVERAGE   MAXIMUM   UNITS   MINIMUM   AVERAGE   MAXIMUM   UNITS   68.45    SAMPLE   MEASUREMENT   GPD   GPD	SAMPLE   MAXIMUM   UNITS   MINIMUM   AVERAGE   MAXIMUM   UNITS   MAXIMUM   AVERAGE   MAXIMUM   UNITS   MAXIMUM   AVERAGE   MAXIMUM   UNITS   MAXIMUM   AVERAGE   MAXIMUM   AVERAGE   MAXIMUM   AVERAGE   MAXIMUM   AVERAGE   MAXIMUM   AVERAGE   A





CLIENT: Koppers Industries, inc.

ATTN: Amos Kamerer

7540 NW St. Helens Road Portland OR, 97210-3663

PHONE: (503) 286-3681

FAX: (503) 285-2831

**PROJECT NAME: Stormwater Tests** 

SUBMITTED: 04/13/05 08:46

REPORT DATE: 04/15/05 13:53

**REPORT NUMBER: 5041301** 

PAGE: 1 OF 1

CI SAMPLE	CLIENTS ID#		DAT	E TIME MA	ATRIX		
5041301-01	Stormwater Tanks		04/1	04/13/2005 0800 Well			
8ample/ Analysis	METHOD	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	TECH	DATE/TIME
5041301-01 General Bench A	SAMPLE (D: Stor Analysis	mwater Tanks					
O & G, TOTAL (HEM	) EPA 1664	TOTAL OIL AND GREASE	ND	mg/L	2.0	PA	04/14/2005 15:38
PHENOLS, TOTAL	EPA 420.1	TOTAL RECOVERABLE PHENOLICS	ND	mg/L	0.050	MRP	04/13/2005 13:51
Semi-Volatile Or	ganics by Gas Ch	romatography/Mass Spectroscopy					
PNAH 825	EPA 625 (SIM)	ACENAPHTHENE	ND	ug/L	0.05	ZZZ	04/14/2006 10:59
		ACENAPHTHYLENE	ND	ug/L	0.05		
		ANTHRACENE	ND	ug/L	0.05		
		BENZO(B)ANTHRACENE	ND	ug/L	0.05		
		BENZO(a)PYRENE	ND .	ug/L	0.05		
4		BENZO(b)FLUORANTHENE	ND	ug/L	0.05		
		BENZO(g.h.l)PERYLENE	0.08	ug/L	0.05	•	
		BENZO(k)FLUORANTHENE	ND	ug/L	0.05		
		CHRYSENE	ND	ug/L	0.05		
		DIBENZO(a,h)ANTHRACENE	ND	ug/L	0.05		
		FLUORANTHENE	ND	ug/L	0.05		
		FLUORENE	ND	ug/L	0.05		
		INDENO(1,2,3-cd)PYRENE	ND	ug/L	0.05		
		NAPHTHALENE	ND ·	ug/L	0.06		
		PHENANTHRENE	0.08	ug/L	0.05		
		PYRENE	0.08	ug/L	0,05		
		Surrogate: 2-Fluoroblphen/l	83.1 %	<b>%RECOVERY</b>	50-150		
		Surrogate: Nitrobenzene-E:5	79.5 %	<b>%RECOVERY</b>	60-160		
		Surrogate: p-terphenyl-D14	77.0 %	%RECOVERY	50-150		

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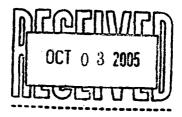
Authorized for Release By:

Richard D. Reid - Laboratory Director

COLUMBIA INSPECTION, INC.

7133 N. Lombard, Portland, OR 97203 Phone:(503) 286-9464 Fax:(503) 286-5355 E-mail:lab@ColumbiaInspection.com





October 3, 2005

Koppers Inc.
Carbon Materials and Chemicals
7540 NW Saint Helens Road
Portland, OR 97210-3663
Tel 503 286 3681
Fax 503 285 2831
www.koppers.com

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642
Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of September 2005.

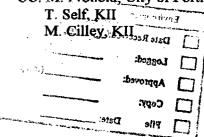
There were no discharges during the month, thus, there were no excursions during the month.

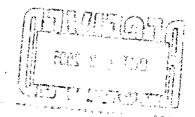
If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: <a href="mailto:turnertj@koppers.com">turnertj@koppers.com</a>

Sincerely,

T. J. Turner General Foreman

CC: M. Pronold, City of Portland, Environmental Services





Environmental Dept. 1	Document Control
Date Received:	
Logged: 1013	105 (nikials/date)
Approved:	(initials/date)
Copy:	
File Date:	

PERMITTEE NAME/ADDRESS (brok.de Facility Names Location in Different)
NAME

Konsons Industrial Inc. NATIONAL POLLISTANT DISCHARGE FUNINATION SYSTEM INPOESI Koppers Industries, Inc. ADDRESS 7540 NW Saint Helens Road Portland, OR. 97210-3663

Northwest Terminal

Multnomah County

OR-000077-9 PERMIT NUMBER

DISCHARGE MONITORING REPORT (DMR)

[2-15] (17-19) 001 DISCHARGE NUMBER

MONITORING PERIOD YEAR MO DAY YEAR MO DAY 05 09 01 to 05

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

101642 DiCheck here if No Discharge

47430

NOTE: Read instructions before completing this form

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

CC: M. Pronold, City of Portland; T. Self, KII; B. Bauman, KII

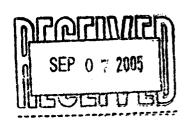
Koppers002996

FACILITY

LOCATION

FROM : KOPPERS

FAX NO. :5032852831





Koppers Inc.

Carbon Materials and Chemicals

7540 NW Saint Holens Road Portland, OR 97210-3663 Tel 503 286 3681 Fax 503 285 2831 www.koppers.com

September 6, 2005

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

**Discharge Monitoring Report** 

Dear Mr. Zais,

Attached please find subject report for the month of August 2005.

There were no discharges during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: turnertj@koppers.com

Sincerely,

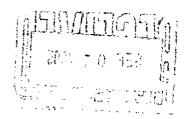
T. L. Turner General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KII

M. Cilley, KII

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:KOPPERS

PERMITTEE NAME/ADDRESS (Include Facility Name/Location If Different) NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-18) Form Approved. OMB No. 2040-0004 Koppers Industries, Inc. Approval expires 05-31-98 OR-000077-9 001 47430 ADDRESS 7540 NW Saint Helens Road PERMIT NUMBER DISCHARGE NUMBER Portland, OR, 97210-3663 101642 MONITORING PERIOD Check here if No Discharge **FACILITY** YEAR MO DAY YEAR MO DAY Northwest Terminal LOCATION FROM 05 T 08 01 05 08 3) то NOTE: Read instructions before completing this form Multnomah County (26-27) (28-29) (30-31) (20-21) (22-23) (24-25) QUANTITY OR LOADING QUALITY OR CONCENTRATION 3 Card Only) (4 Card Only) FREQUENC OF ANALYSIS PARAMETER NΩ SAMPLE (48-53) (54-61) (38-45) (46-53) (54-81) έx (32-37) AVERAGE MINIMUM MAXIMUM UNITS AVERAGE MAXIMUM UNITS (62-83) (84-68) (69-70) SAMPLE FLOW CALC MEASUREMENT n N/A **GPD** SEE COVER LETTER PERMIT REQUIREMENT SAMPLE 0 1/7 GRAB MEASUREMENT O TEMPERATURE PERMIT C N/A REQUIREMENT N/A N/A SAMPLE MEASUREMENT 0 1/7 GRAB SU PH PERMIT • 6.0 9.0 REQUIREMENT SAMPLE MEASUREMENT 1/7 **GRAB** OIL & GREASE mq/L PERMIT REQUIREMENT 0.0 10.0 15.0 SAMPLE MEASUREMENT 0 1/30 GRAB ma/L PHENOLS PERMIT REQUIREMENT 0.00.5 0.7 SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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R. D. Collins

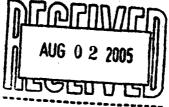
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FAX NO. :5032852831





Koppers Inc.

Carbon Materials and Chemicals

7540 NW Saint Helens Road Portland, OR 97210-3663 Tel 503 286 3681 Fax 503 285 2831 www.koppers.com

August 2, 2005

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of July 2005.

There were no discharges during the month, thus, there were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: turnertj@koppers.com

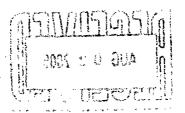
Sincerely,

T. Turner General Foreman

CC: M. Pronold, City of Portland, Environmental Services

T. Self, KII

M. Cilley, KII



Date Received: 812105

Environmental Dept. Document Control

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: KOPPERS

PERMITTEE NAME/ADDRESS (Include Facility Name), ocation if Different) NATIONAL POLLUTANT DISCHARGE FLIMINATION SYSTEM (NPDPS) Form Approved. OMB No. 2040-0004 DISCHARGE MONITORING REPORT (DMR) Koppers Industries, Inc. 12-16 Approval expires 05-31-98 OR-000077-9 ດດາ 47430 **ADDRESS** 7540 NW Saint Helens Road PERMIT NUMBER DISCHARGE MUMBER Portland, OR. 97210-3663 101642 MONITORING PERIOD GCheck here if No Discharge YEAR MO DAY YEAR MO DAY FACILITY Northwest Terminal LOCATION FROM 05 07  $\overline{\mathbf{u}}$ 05 07 31 TO NOTE: Read Instructions before completion this form Multnomah County (20-21) (22-23) [24-25] (26-27) (28-29) (30-31) QUANTITY OR LOADING 3 Card Only QUALITY OR CONCENTRATION (4 Cord Only) REQUENC PARAMETER NO. SAMPLE (48-53) (48-53) (54-81) (38-45) (54-61) (32-37) ANALYSIS AVERAGE MINIME) IM AVERAGE MAXIMUM UNITS MAXIMUM UNITS (82-63) (64-89) (69-70) SAMPLE FLOW CALC 0 MEASUREMENT N/A **GPD** SEE COVER LETTER PERMIT REQUIREMENT SAMPLE 0 GRAB MEASUREMENT 0 TEMPERATURE PERMIT C N/A N/A REQUIREMENT N/A SAMPLE MEASUREMENT  $\mathbf{0}$ 1/7 GRAB SU PH PERMIT 6.0 REQUIREMENT 9.0 SAMPLE MEASUREMENT **GRAB** OIL & GREASE mq/L PERMIT REQUIREMENT 0.0 10.0 15.0 SAMPLE MEASUREMENT Û 1/30 GRAB mg/L PHENOLS PERMIT 0.0 0.5 0.7 REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT CORTEY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENT BYFESE PREPARED LADER MY DIRECTION OR SPERIFICION. IN ACCORDANCE WITH A 8YS TEM DESCRIPED TO ACSUME THAT ON METAL PROPERTY OF THE PENSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PROPERTY OF THE PENSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PROPOSED IN MANAGE THE SYSTEM, OR THOSE PROPOSED BY THE PENSON OR PERSON WHO MANAGE THE SYSTEM, OR THOSE PROPOSED IN THE PENSON OF THE PENSON OR THE PENSON OF THE PENSON OF THE PENSON OF THE PENSON OR THE PENSON OF THE PEN NAME/TITLE PRINCIPAL EXECUTIVE OFFICER TELEPHONE DATE Turner 08| 02 05 503. 286-3681 R. D. Collins GONATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

CC: M. Pronold, City of Portland; T. Self, KII; B. Baumen, KII

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DAY

YEAR

NUMBER

TYPED OR PRINTED

FAX NO. :5032852831



Jul. 01 2005 01:31PM

Koppers Inc. Carbon Materials and Chemicals 7540 NW Saint Helens Road Portland, OR 97210-3663 Tel 503 286 3681 Fax 503 285 2831

www.koppers.com

July 1, 2005

Oregon Department of Environmental Quality Northwest Region 2020 SW Forth Ave., Suite 400 Portland, Oregon 97201-4987

Attention: Elliot J. Zais

Sr. Environmental Engineer

Reference: NPDES Permit No. 101642

Discharge Monitoring Report

Dear Mr. Zais,

Attached please find subject report for the month of June 2005.

During the month, we had one regular discharge of our 220,000-gallon storage tanks. This "slug" discharge of the 220,000 gallons was pumped on June 30th. There were no excursions during the month.

If you have any questions, I can be reached at # 503/286-3681 or via e-mail at: turnerti@koppers.com

Sincerely, T.J. Turner General Foreman Environmental Dept. Document Control CC: M. Pronold, City of Portland, Environmental Services T. Self, KII (mb/zighing Bauman, KII (atsideistitui).

Environmen	tal Dept. Document Control
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PERMITTEE NAME/ADDRESS (Include Facility Name/Location # Different) ANAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (IN-DISCHARGE MONITORING REPORT (DMR) (17-19) Form Approved. OMB No. 2040-0004 Koppers Industries, Inc. Approval expires 05-31-98 ADDRESS 08-000077-9 വ . 47430 7540 NW Saint Helens Road PERMIT NUMBER DISCHARGE NUMBER Portland, OR. 97210-3663 101642 MONITORING PERIOD Check here if No Discharge FACILITY Northwest Terminal YEAR MO DAY YEAR MO DAY LOCATION FROM 05 06 01 to 05 06 30 NOTE: Read instructions before completing this form Multnomah County (20-21) (22-23) (24-25) (26-27) (28-29) (30-31) QUANTITY OR LOADING QUALITY OR CONCENTRATION FREQUENCY OF ANALYSIS (3 Card Only) (4 Card Only) NO. PARAMETER SAMPLE (48-53) (54-61) (38-45) (48-53) (54-61) TYPE (32-37) (62-63) AVERAGE MINIMIM AVERAGE MAXIMUM UNITS (69-70) MAXIMUM UNITS (84-88) SAMPLE. PLOW CALC n N/A MEASUREMENT GPD SEE COVER LETTER PERMIT REQUIREMENT SAMPLE 19.2 19.3 19.4 GRAB 1/7 0 MEASUREMENT O TEMPERATURE C PERMIT N/A N/A N/A REQUIREMENT SAMPLE 6.9 6.9 1/7 6.9 ٥ **GRAB** MEASUREMENT SU PH PERMIT 6.0 9.0 REQUIREMENT SAMPLE 5.0 5.0 1/7 GRAB 5.0 O MEASUREMENT OIL & GREASE mq/L PERMIT REQUIREMENT 0.0 10.0 15.0 SAMPLE 0.050 0.050 0.050 1/30 **GRAB** MEASUREMENT 0 mg/L PHENOLS PERMIT 0.0 0.5 0.7 REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT ICERTEVUNCIER PENNLTY CE LINI TIME THIS COCUMENTAND ALL ATTACHMENTS WERE PREFINED.

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

CC: M. Pronold, City of Portland; T. Self, KII; B. Bauman, KII

503.

286-3681

NUMBER

Turner

SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

R. D. Collins

TYPED OR PRINTED

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